Main Document

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| FILED   |
|---|
| SEP 2 9 2017  |
| CLERKE & BANKRUPTCY COURT<br>CENTRAL DISTRICT OF CALIFORNIA<br>BY: Deputy Clerk |
| Check if this is an amended filing  |

United States Bankruptcy Court for the:

Central District of California

Case number (If known):

Chapter you are filing under:

Chapter 7

Chapter 7

Chapter 11

Chapter 12

Chapter 13

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| First name  Middle name  Last name   |
|--|
| Middle name  Last name   |
| Middle name  Last name   |
| Last name  |
|  |
|  |
|  |
| Suffix (Sr., Jr., II, III)   |
| First name  Middle name  |
| Last name  |
| First name   |
| Middle name  |
| Last name  |
| an na kali suku kan kan menekatuk di membala kali suku muni kanpanan dan minana kan di kuman kali da kan kan d |
| xxx - xx   |
| OR   |
| 9 xx - xx  |
|  |
|  |

## Case 6:17-bk-18166-WJ Doc 1 Filed 09/29/17 Entered 09/29/17 11:18:06 Desc Main Document Page 2 of 57

| Debtor 1      | Daniel First Name Middle Na  | Villareal  Last Name   | Case number (if known)   |
|---------------|--|--|--|
| a storest a   |  | About Debtor 1:  | About Debtor 2 (Spouse Only in a Joint Case):  |
| and<br>Ide    | / business names<br>I Employer<br>ntification Numbers<br>N) you have used in | I have not used any business names or EINs.  | ☐ I have not used any business names or EINs.  |
|               | last 8 years   | Business name  | Business name  |
|               | ude trade names and<br>ng business as names                                  |  | Puninga nama   |
|               | 3  | Business name  | Business name  |
|               |  | EIN -  | EIN  |
|               |  | EIN  | EIN  |
| 5. <b>W</b> h | ere you live   | and the second of the second o | If Debtor 2 lives at a different address:  |
|               |  | 44444 Carra Dand Spo 62  |  |
|               |  | 11414 Serra Road Spc 63 Number Street  | Number Street  |
|               |  | Apple Valley CA 923  | 308  |
|               |  | San Bernaralno   | Code City State ZIP Code   |
|               |  | County   | County   |
|               |  | If your mailing address is different from the o above, fill it in here. Note that the court will sen any notices to you at this mailing address.   |  |
|               |  | Number Street  | Number Street  |
|               |  | P.O. Box   | P.O. Box   |
|               |  | City State ZIP (   | Code City State ZIP Code   |
|               |  |  |  |
| 6. Wh         | y you are choosing   | Check one:   | Check one:   |
|               | s district to file for<br>nkruptcy   | Over the last 180 days before filing this petitic<br>I have lived in this district longer than in any<br>other district.   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
|               |  | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)  |
|               |  |  |  |
|               |  |  |  |
|               |  |  |  |

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| Del | btor 1 Daniel                                      |  | <u>llarea</u>   |   |  | Case number (if kno  | own)  |
|-----|--|--|---|---|--|--|---|
|     | First Name Middle Nar                              | ne   | Last Name   |   |  |  |   |
| Pa  | art 2: Tell the Court Abou                         | ut Your Ba   | ankrup  | tcy Case  |  |  |   |
| 7.  | The chapter of the Bankruptcy Code you             | Check or<br>for Bankr                                      | ne. (For<br>ruptcy (F   | a brief description of each, s<br>form 2010)). Also, go to the  | see Notice<br>top of pa  | ce <i>Required by 11</i> age 1 and check the   | U.S.C. § 342(b) for Individuals Filing e appropriate box.   |
|     | are choosing to file under                         | ☑ Chap   | oter 7  |   |  |  |   |
|     | undoi  | ☐ Chap   | ter 11  |   |  |  |   |
|     |  | ☐ Chap   | ter 12  |   |  |  |   |
|     |  | ☐ Chap   | oter 13   |   |  |  |   |
| 8.  | How you will pay the fee                           | local yours subn with  I nee Apple  I req By la less pay t | court f<br>self, yo<br>nitting y<br>a pre-p<br>ed to pa<br>ication<br>uest th<br>www, a ju<br>than 15<br>the fee  | or more details about how unay pay with cash, cast our payment on your being inted address.  The second of the second of the second of the second of the official poverty or more units of the official poverty or may but is not required. | wyou m<br>shier's c<br>half, you<br>ts. If yo<br>e Filing<br>ou may<br>red to,<br>v line the | nay pay. Typically theck, or money our attorney may pure the control of the contr | tion, sign and attach the nts (Official Form 103A).  on only if you are filing for Chapter 7. and may do so only if your income is a family size and you are unable to ust fill out the Application to Have the |
| 9.  | Have you filed for                                 | ☑ No   |   |   |  |  |   |
|     | bankruptcy within the last 8 years?                | and selective  | District  |   | When   |  | Case number   |
|     | iast o years :                                     |  |   |   |  | MM / DD / YYYY   |   |
|     |  |  | District  |   | When   | MM / DD / YYYY   | Case number   |
|     |  |  | District  |   | When   | MM / DD / YYYY   | Case number   |
|     |  |  |   |   |  | MM / DD / YYYY   |   |
| 10  | . Are any bankruptcy                               | <b>₩</b> No  |   |   |  |  |   |
|     | cases pending or being                             |  | Debtor  |   |  |  | Relationship to you   |
|     | filed by a spouse who is not filing this case with |  |   |   |  |  | Case number, if known   |
|     | you, or by a business partner, or by an affiliate? |  |   |   |  | MM / DD / YYYY   |   |
|     | diffiato.  |  | Debtor  |   |  |  | Relationship to you   |
|     |  |  | District  |   | When   | MM / DD / YYYY   | Case number, if known   |
|     |  |  |   |   |  | WIWI / DD / TTTT   |   |
| 11. | . Do you rent your residence?                      | No. Yes.   | reside  | our landlord obtained an evid<br>nce?   | ction judç   | gment against you  | and do you want to stay in your   |
|     |  |  | (Married Property of the Control of | . Go to line 12.  |  |  |   |
|     |  |  |   | s. Fill out <i>Initial Statement A</i> s bankruptcy petition.   | bout an  | Eviction Judgment  | Against You (Form 101A) and file it with  |

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| Debt | tor 1 Daniel First Name Middle Nam   |  | illareal   |  | Case number (#         | f known)   |  |   |
|------|--|--|--|--|------------------------|--|--|---|
|      |  |  |  |  |                        |  |  |   |
| Par  | t 3: Report About Any B  | usiness  | es You Own as a Sol  | Proprieto  | <b>7</b>               |  |  |   |
| 40   | Are you a cale proprietor  | 7  | 2.4.5  |  |                        |  |  |   |
|      | of any full- or part-time  | , months and   |  |  |                        |  |  |   |
|      |  | ₩ Yes.   | Name and location of bus   | siness   |                        |  |  |   |
|      | business you operate as an individual, and is not a separate legal entity such as  |  | Name of business, if any   | ***************************************  |                        |  |  |   |
|      | Are you a sole proprieto of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.  Are you filling under Chapter 11 of the Bankruptcy Code and are you a small busines debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).  The Report if You Ow Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?  For example, do you own perishable goods, or livestoc that must be fed, or a building the safety of the public health or a building that must be fed, or a building that a sole public health or a building that must be fed, or a building that a building the safety of the public health or a building that must be fed, or a building that must be fed, or a building that a sole public health or a building that must be fed, or a building that a buil |  | Number Street  |  |                        |  |  |   |
|      | sole proprietorship, use a<br>separate sheet and attach it   |  |  |  |                        | § 101(27A))  i.C. § 101(51B))  A))  101(6))  sther you are a small business debtor so that it a small business debtor, you must attach your low statement, and federal income tax return or if in 11 U.S.C. § 1116(1)(B).  I business debtor according to the definition in mess debtor according to the definition in the  That Needs Immediate Attention |  |   |
|      | to this petition.  |  | City   | - Maria - Mari | State                  | ZIP Cod  | de   |   |
|      |  |  | Check the appropriate bo   | x to describe  | your business:         |  |  |   |
|      |  |  | ☐ Health Care Business   | s (as defined i  | n 11 U.S.C. § 101(27/  | ۹))  |  |   |
|      |  |  | ☐ Single Asset Real Es   | tate (as define  | ed in 11 U.S.C. § 101( | 51B))  |  |   |
|      |  |  | ☐ Stockbroker (as defin  | ed in 11 U.S.  | C. § 101(53A))         |  |  |   |
|      |  |  | Commodity Broker (a  | s defined in 1   | 1 U.S.C. § 101(6))     |  |  |   |
|      |  |  | ☐ None of the above  |  |                        |  |  |   |
|      | Chapter 11 of the<br>Bankruptcy Code and<br>are you a <i>small business</i>  | can set a<br>most rec<br>any of th   | appropriate deadlines. If y<br>ent balance sheet, staten<br>lese documents do not ex | ou indicate the<br>nent of operat<br>ist, follow the   | at you are a small bus | siness debtor,<br>nent, and feder  | you must attach your<br>eral income tax return or if |   |
|      | 2. Are you a sole proprietor of any full- or part-time business?  A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.  If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.  3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).  2. Are You filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).  2. Are You filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  For a definition of small business debtor, see 11 U.S.C. § 101(51D).  | □ No.  | I am filing under Chapter  |  | NOT a small business   | debtor accord  | ding to the definition in                            |   |
|      | 17 0.0.0. g 10 ((0 <i>12)</i> .  |  | I am filing under Chapter  | 11 and I am a  | a small business debto | or according to  | o the definition in the                              |   |
|      |  |  | Bankruptcy Code.   |  |                        |  |  |   |
| Pa   | rt 4: Report if You Own  | or Have  | Any Hazardous Prope  | erty or Any  | Property That Ne       | eds Immedi   | ate Attention  |   |
| 14.  | Do you own or have any   | M No   |  |  |                        |  |  |   |
|      | property that poses or is  |  | What is the hazard?  |  |                        |  |  |   |
|      |  | <b>—</b> 103.  | Wilders the nazara:  |  |                        |  |  | _ |
|      | identifiable hazard to   |  |  |  |                        |  |  |   |
|      |  |  |  |  |                        |  |  |   |
|      | property that needs  |  | If immediate attention is  | needed, why  | is it needed?          |  |  | _ |
|      | perishable goods, or livestock<br>that must be fed, or a building  | Yes. Name and location of business   Yes. Name of business   Name of busi |  |  |                        |  |  |   |
|      | <b>,</b>   |  |  |  |                        |  |  |   |
|      |  |  |  |  |                        |  |  |   |
|      |  |  |  | City   |                        |  | tate ZIP Code  | _ |

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| Debtor 1 | Daniel     |             | Villareal | Case number (if known) |
|----------|------------|-------------|-----------|------------------------|
|          | First Name | Middle Name | Last Name |                        |

### Part 5:

### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not  | required  | to receive | a briefing | about |
|-----------|-----------|------------|------------|-------|
| credit co | ounseling | because of | of:        |       |

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required t | o receive a | briefing | about |
|---------------------|-------------|----------|-------|
| credit counseling   | because of: |          |       |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| btor 1 Daniel First Name Middle Name   | Villareal<br>Last Name   | Case number (if known  | n)   |
|--|--|--|--|
|  |  |  |  |
| t 6: Answer These Ques   | tions for Reporting Purpos   | ies  |  |
| What kind of debts do  | 16a. <b>Are your debts prima</b> as "incurred by an individu                                   | rily consumer debts? Consumer debts all primarily for a personal, family, or house   | s are defined in 11 U.S.C. § 101(8)<br>ehold purpose."   |
| you have?  | No. Go to line 16b. Yes. Go to line 17.  |  |  |
|  | 16b. <b>Are your debts prima</b> money for a business or in                                    | rily business debts? Business debts an exert or through the operation of the b   | re debts that you incurred to obtain<br>ousiness or investment.  |
|  | No. Go to line 16c. Yes. Go to line 17.  |  |  |
|  | 16c. State the type of debts yo  | u owe that are not consumer debts or busi  | ness debts.  |
| Are you filing under Chapter 7?  | ☐ No. I am not filing under C  | hapter 7. Go to line 18.   | rigina i da succeentrado en en esperarior se meso come do encome de la encolonida e                            |
| Do you estimate that after any exempt property is  | Yes. I am filing under Chap administrative expens  | iter 7. Do you estimate that after any exem<br>es are paid that funds will be available to c   | pt property is excluded and<br>distribute to unsecured creditors?  |
| excluded and   | <b>☑</b> No  |  |  |
| administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes  | and the second s | and a great and the second of the second |
| How many creditors do  | <b>1</b> 1-49  | 1,000-5,000<br>5,001-10,000  | 25,001-50,000<br>50,001-100,000  |
| you estimate that you owe?   | ☐ 50-99<br>☐ 100-199<br>☐ 200-999  | 10,001-25,000  | ☐ More than 100,000  |
|  | <b>1</b> \$0-\$50,000  | \$1,000,001-\$10 million   | \$500,000,001-\$1 billion  |
| estimate your assets to  | \$50,001-\$100,000   | \$10,000,001-\$50 million<br>\$50,000,001-\$100 million  | \$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion  |
|  | \$100,001-\$500,000<br>\$500,001-\$1 million   | \$100,000,001-\$500 million  | ☐ More than \$50 billion   |
| be worth?  How much do you   | \$0-\$50,000   | \$1,000,001-\$10 million   | \$500,000,001-\$1 billion  |
| estimate your liabilities  | \$50,001-\$100,000   | ■ \$10,000,001-\$50 million ■ \$50,000,001-\$100 million   | \$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion  |
| to be?   | □ \$100,001-\$500,000<br>□ \$500,001-\$1 million   | \$100,000,001-\$500 million  | ☐ More than \$50 billion   |
| rt 7: Sign Below   |  |  |  |
| or you   | correct.   | and I declare under penalty of perjury that  |  |
|  | of title 11, United States Code under Chapter 7.   | Chapter 7, I am aware that I may proceed,<br>e. I understand the relief available under ea   | ich chapter, and I choose to proceed   |
|  | this document, I have obtaine  | and I did not pay or agree to pay someone<br>d and read the notice required by 11 U.S.C  | J. § 342(b).   |
|  | •  | with the chapter of title 11, United States 0  |  |
|  | I understand making a false s<br>with a bankruptcy case can re<br>18 U.S.C. §§ 152, 1341, 1519 | tatement, concealing property, or obtaining<br>esult in fines up to \$250,000, or imprisonme<br>), and 3571.   | g money or property by fraud in connectent for up to 20 years, or both.  |
|  | Signature of Debtor 1  | Signatur   | re of Debtor 2   |
|  | Signature of Debtor 1  | -  |  |
|  | Executed on  | / YYYY Execute   | d on   |

| Debtor 1  | Daniel  |             | Villareal   | Case number (if known)  |   |
|-----------|---|-------------|---|---|---|
|           | First Name                                      | Middle Name | Last Name   |   |   |
|           |   |             |   | 1   |   |
|           | if you are fili<br>tcy without a                |             | should understand that many themselves successfully. Because  | dual, to represent yourself in bankruptcy<br>people find it extremely difficult to re<br>ause bankruptcy has long-term finan<br>yly urged to hire a qualified attorney.   | epresent<br>icial and legal   |
| an attori | e represente<br>ney, you do i<br>file this page | not         | technical, and a mistake or inactio<br>dismissed because you did not file<br>hearing, or cooperate with the cou<br>firm if your case is selected for aud  | thy file and handle your bankruptcy case. In may affect your rights. For example, you a required document, pay a fee on time, int, case trustee, U.S. trustee, bankruptcy dit. If that happens, you could lose your right, including the benefit of the automatic sta   | ur case may be<br>attend a meeting or<br>administrator, or audit<br>ght to file another                                   |
|           |   |             | court. Even if you plan to pay a pa<br>in your schedules. If you do not lis<br>property or properly claim it as exe<br>also deny you a discharge of all yo<br>case, such as destroying or hiding<br>cases are randomly audited to det | debts in the schedules that you are requiritional debt outside of your bankruptcy, you are debt, the debt may not be discharged. It is a debt, the debt may not be able to keep the property of your debts if you do something dishonest in property, falsifying records, or lying. Indivermine if debtors have been accurate, trurime; you could be fined and imprisoned | rou must list that debt If you do not list operty. The judge can o your bankruptcy vidual bankruptcy thful, and complete. |
|           |   |             | hired an attorney. The court will no<br>successful, you must be familiar w  | orney, the court expects you to follow the rot treat you differently because you are fill with the United States Bankruptcy Code, the cal rules of the court in which your case is on laws that apply.  | ng for yourself. To be<br>ne Federal Rules of   |
|           |   |             | Are you aware that filing for bankri consequences?  | uptcy is a serious action with long-term fir  | nancial and legal   |
|           |   |             | ☐ No<br>☑ Yes   |   |   |
|           |   |             | Are you aware that bankruptcy fra inaccurate or incomplete, you could   | ud is a serious crime and that if your bank<br>ld be fined or imprisoned?   | ruptcy forms are  |
|           |   |             | ☐ No<br>☑ Yes   |   |   |
|           |   |             | Did you pay or agree to pay some  ☑ No ☐ Yes. Name of Person  | one who is not an attorney to help you fill   | out your bankruptcy forms?  |
|           |   |             | Attach Bankruptcy Petition  | Preparer's Notice, Declaration, and Signatur  | re (Official Form 119).   |
|           |   |             | have read and understood this no  | at I understand the risks involved in filing tice, and I am aware that filing a bankrupt rights or property if I do not properly han  | cy case without an  |
|           |   | •           | x A/Ware  | <u> </u>  |   |
|           |   |             | Signature of Debtor 1   | Signature of Debtor 2   |   |

Date

Contact phone \_\_\_

Cell phone

Email address

# STATEMENT OF RELATED CASES INFORMATION REQUIRED BY LBR 1015-2 UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

| 1.       | A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)   |
|----------|--|
|          | RS:97-14763  |
| 2.       | (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)  N/A   |
| 3.       | (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).) |
|          | IV/A   |
| 4.       | (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)  N/A  |
|          |  |
| ۱c       | leclare, under penalty of perjury, that the foregoing is true and correct.   |
| E,       | xecuted at, California   |
| <b>C</b> | Signature of Debtor  |
| D        | ate: 9/29/2017 Signature of Joint Debtor   |
| ٠,       | Signature of Joint Debtor  |

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| Fill in this in     | formation to ide    | ntify your case:           |               |  |
|---------------------|---------------------|----------------------------|---------------|--|
| Debtor 1            | Daniel              |                            | Villareal     |  |
| Debior 1            | First Name          | Middle Name                | Last Name     |  |
| Debtor 2            |                     | 16:24:- 1                  | Last Name     |  |
| (Spouse, if filing) | First Name          | Middle Name                | Last Name     |  |
| United States E     | Bankruptcy Court fo | r the: Central District of | of California |  |
| Case number         |                     |                            |               |  |
|                     | (If known)          |                            |               |  |

Check if this is an amended filing

12/15

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| art 1: Summarize Your Assets   |                                      |
|--|--------------------------------------|
|  | Your assets<br>Value of what you own |
| . Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B   | \$19,000.00                          |
| 1b. Copy line 62, Total personal property, from Schedule A/B   | \$3,200.00                           |
| 1c. Copy line 63, Total of all property on Schedule A/B  | \$22,200.00                          |
| Part 2: Summarize Your Liabilities   |                                      |
|  | Your liabilities<br>Amount you owe   |
| <ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D</li> </ol> | \$15,116.00                          |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  | \$0.00                               |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F  | + \$ 67,970.00                       |
| Your total liabilities   | \$83,086.00                          |
| Part 3: Summarize Your Income and Expenses   |                                      |
| 4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I  | \$3,240.40                           |
| 5. Schedule J: Your Expenses (Official Form 106J)  Copy your monthly expenses from line 22c of Schedule J  | \$                                   |

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| Debt        | or 1                | First Name                          | Middle Name                 |                                | Last Name                                      |                                     | С  | ase number (i        | f known)     |             | <del>.</del> |          |
|-------------|---------------------|-------------------------------------|-----------------------------|--------------------------------|--|-------------------------------------|--|----------------------|--------------|-------------|--------------|----------|
| Par         | t 4:                | Answer Th                           | ese Ques                    | tions for                      | Administra                                     | ative and Sta                       | tistical Record                            | 8                    |              |             |              |          |
| 6. /        | Are you             | ı filing for ba                     | ankruptcy u                 | nder Char                      | oters 7, 11, o                                 | r 13?                               |  |                      |              |             |              |          |
|             | ☐ No.<br>☑ Yes      |                                     | thing to repo               | rt on this p                   | art of the forr                                | n. Check this bo                    | ox and submit this                         | form to the o        | court with y | your other  | schedule     | S.       |
| 7. V        | Vhat ki             | nd of debt d                        |                             |                                |  |                                     |  | t av ter. I die eine |              |             |              |          |
| ١           |                     |                                     |                             |                                |  |                                     | ose "incurred by a<br>for statistical purp |                      |              |             | nal,         |          |
| ١           |                     | r debts are i                       |                             |                                |  | u have nothing t                    | o report on this pa                        | ert of the form      | n. Check tl  | his box and | d submit     |          |
|             |                     |                                     |                             |                                |  |                                     |  | A CHARLES A COLOR    |              |             |              |          |
| 8. <b>I</b> | From the<br>Form 12 | ne <i>Statemen</i><br>22A-1 Line 11 | t of Your Ci<br>I; OR, Form | <i>irrent Mor</i><br>122B Line | i <b>thly Income</b> :<br>11; <b>OR</b> , Form | : Copy your tota<br>m 122C-1 Line 1 | l current monthly i<br>4.                  | ncome from           | Official     |             | \$           | 3,240.40 |
|             |                     |                                     |                             |                                | e nyagon ne ne tanàna                          |                                     |  | and a                |              |             |              |          |
| 9. <b>(</b> | Copy th             | e following                         | special cate                | gories of                      | claims from                                    | Part 4, line 6 o                    | f Schedule E/F:                            |                      |              |             |              |          |
|             |                     |                                     |                             |                                |  |                                     |  | Total                | claim        |             |              |          |
|             | From                | Part 4 on So                        | :hedule E/F                 | copy the                       | following:                                     |                                     |  |                      |              |             |              |          |
| ,           | 9a. Don             | nestic suppor                       | t obligations               | (Copy line                     | 6a.)   |                                     |  | \$                   | ·            | 0.00        |              |          |
| 9           | 9b. Tax             | es and certai                       | n other debt                | s you owe                      | the governme                                   | ent. (Copy line 6                   | b.)  | \$                   |              | 0.00        |              |          |
| 9           | 9c. Clai            | ms for death                        | or personal                 | injury while                   | you were int                                   | toxicated. (Copy                    | line 6c.)                                  | \$                   |              | 0.00        |              |          |
| ,           | 9d. Stud            | dent loans. (C                      | Copy line 6f.)              | ı                              |  |                                     |  | \$                   |              | 0.00        |              |          |
| ,           |                     | igations arisir<br>rity claims. (C  |                             |                                | greement or                                    | divorce that you                    | did not report as                          | \$                   |              | 0.00        |              |          |
| ,           | 9f. Deb             | ots to pension                      | or profit-sha               | aring plans                    | , and other si                                 | imilar debts. (Co                   | py line 6h.)                               | + \$                 |              | 0.00        |              |          |
| ,           | 9g. <b>Tot</b> a    | al. Add lines                       | 9a through 9                | f.                             |  |                                     |  | \$                   |              | 0.00        |              |          |

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| Fill in this information to identify your case and this                     | filing:  |   |  |  |  |
|---|--|---|--|--|--|
| Debtor 1 Daniel   | Villareal  |   |  |  |  |
| First Name Middle Name  Debtor 2 (Spouse, if filing) First Name Middle Name | Last Name  |   |  |  |  |
| United States Bankruptcy Court for the: Central District                    |  |   |  |  |  |
| Case number   |  |   |  |  |  |
| Oddo Navisor  |  | u   | Check if this is an<br>amended filing              |  |  |
| Official Form 106A/P  |  |   |  |  |  |
| Official Form 106A/B  |  |   |  |  |  |
| Schedule A/B: Propert   | у  |   | 12/15  |  |  |
|   | ete and accurate as possible. If two married people ore space is needed, attach a separate sheet to this ver every question.  Land, or Other Real Estate You Own or Hav  | are filing together, bot<br>s form. On the top of a<br>e an interest in   | n are equally                                      |  |  |
| Do you own or have any legal or equitable intere                            | st in any residence, building, land, or similar prope  | erty?   |  |  |  |
| <ul><li>No. Go to Part 2.</li><li>✓ Yes. Where is the property?</li></ul>   |  |   |  |  |  |
| Tes. Where is the property:   | What is the property? Check all that apply.  | Do not deduct secured cla   |  |  |  |
| 1.1. 11414 Serra Road Spc #63   | ☐ Single-family home  Duplex or multi-unit building  | the amount of any secured<br>Creditors Who Have Clain   | ns Secured by Property.                            |  |  |
| Street address, if available, or other description                          | Condominium or cooperative   | Current value of the  | Current value of the                               |  |  |
|   | <ul> <li>Manufactured or mobile home</li> <li>Land</li> </ul>  | entire property?<br>\$ 19,000.00  | portion you own?<br>\$ 19,000.00                   |  |  |
|   | Land Investment property   | \$  | <u> </u>   |  |  |
| Apple Valley CA 92308 City State ZIP Code                                   | Timeshare  | Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known. |  |  |  |
| <b></b> ,   | Other  |   |  |  |  |
|   | Who has an interest in the property? Check one.  |   |  |  |  |
| San Bernardino  | ☑ Debtor 1 only Debtor 2 only  |   |  |  |  |
| County  | Debtor 1 and Debtor 2 only   | Check if this is co (see instructions)  | mmunity property                                   |  |  |
|   | At least one of the debtors and another  |   |  |  |  |
|   | Other information you wish to add about this it property identification number:  | em, such as local   |  |  |  |
| If you own or have more than one, list here:                                | property technical technic |   |  |  |  |
| n you own or nate more area one, we want                                    | What is the property? Check all that apply.  | Do not deduct secured cla   | aims or exemptions. Put                            |  |  |
|   | Single-family home   | the amount of any secure<br>Creditors Who Have Clair  | d claims on Schedule D:<br>ns Secured by Property. |  |  |
| 1.2. Street address, if available, or other description                     | Duplex or multi-unit building  |   |  |  |  |
|   | ☐ Condominium or cooperative ☐ Manufactured or mobile home   | Current value of the entire property?   | portion you own?                                   |  |  |
|   | Land   | \$  | \$   |  |  |
|   | ☐ Investment property  | Describe the nature   | of your ownership                                  |  |  |
| City State ZIP Code   | Timeshare  | interest (such as fee   | simple, tenancy by                                 |  |  |
| ,   | Other Other Check one.   | the entireties, or a lif  | e estate), if Known.                               |  |  |
|   | Debtor 1 only  |   |  |  |  |
|   | Debtor 1 only  Debtor 2 only   |   |  |  |  |
| County  | Debtor 1 and Debtor 2 only   | Check if this is co   | ommunity property                                  |  |  |
|   | ☐ At least one of the debtors and another  | (see instructions)  |  |  |  |
|   | Other information you wish to add about this ite   | em, such as local   |  |  |  |

| Debtor 1                | Case 6:17-bk-1  Daniel  First Name Middle 1   | Ma   | oc 1 Filed 09/29/17 Entered 09/2<br>tin Document Page 12 of 57<br>Villareal Case number (# kr   |   | Desc  |
|-------------------------|---|--|---|---|---|
| 1.3.                    | Street address, if available  |  | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare   | Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property?  \$  Describe the nature of the secured claim is a secured continuous and continuo       | d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  |
|                         | City  | State ZIP Code   | Other Other Check one.  | interest (such as fee<br>the entireties, or a life  |   |
|                         | County  |  | <ul> <li>□ Debtor 1 only</li> <li>□ Debtor 2 only</li> <li>□ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> </ul> Other information you wish to add about this ite  | Check if this is co<br>(see instructions)   | ommunity property   |
| 2. Add<br>you<br>Part 2 | have attached for Part 1  | I. Write that number I   | Il of your entries from Part 1, including any entries here  | s for pages   | \$19,000.00   |
| you ow                  | own, lease, or have leg<br>n that someone else drive  |  |   |   |   |
| 3. Can                  |   | s. If you lease a vehicl   | est in any vehicles, whether they are registered or le, also report it on Schedule G: Executory Contracts, motorcycles  | <b>not?</b> Include any vehicle<br>and Unexpired Leases.  | s   |
|                         | No<br>Yes   | s. If you lease a vehicl   | le, also report it on Schedule G: Executory Contracts s, motorcycles  Who has an interest in the property? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only  | not? Include any vehicle and Unexpired Leases.  Do not deduct secured of the amount of any secure Creditors Who Have Clair  | aims or exemptions. Put<br>ed claims on Schedule D:<br>ims Secured by Property.   |
|                         | No<br>Yes<br>Make:<br>Model:  | s. If you lease a vehicles sport utility vehicles Chevrolet Camaro | le, also report it on Schedule G: Executory Contracts s, motorcycles  Who has an interest in the property? Check one.  Debtor 1 only  | Do not deduct secured cl<br>the amount of any secure<br>Creditors Who Have Clai   | aims or exemptions. Put<br>ad claims on Schedule D;<br>ms Secured by Property.<br>Current value of the<br>portion you own?  |
| 3.1.                    | No Yes  Make:  Model:  Year:  Approximate mileage:  Other information:  | Chevrolet Camaro 2014 35000  | le, also report it on Schedule G: Executory Contracts s, motorcycles  Who has an interest in the property? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another  ☐ Check if this is community property (see   | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  | aims or exemptions. Put<br>ad claims on Schedule D;<br>ms Secured by Property.<br>Current value of the<br>portion you own?  |
| 3.1.                    | No Yes  Make:  Model:  Year:  Approximate mileage:  Other information:  ou own or have more than  Make:  Model: | Chevrolet Camaro 2014 35000  | le, also report it on Schedule G: Executory Contracts  s, motorcycles  Who has an interest in the property? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another  ☐ Check if this is community property (see instructions)  Who has an interest in the property? Check one. ☑ Debtor 1 only ☐ Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$ 14,000.00  Do not deduct secured of the amount of any secure   | laims or exemptions. Put and claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$ 0.00  claims or exemptions. Put and claims on Schedule D: ims Secured by Property. |
| 3.1.                    | No Yes  Make:  Model: Year: Approximate mileage: Other information:  ou own or have more than Make:             | Chevrolet Camaro 2014 35000  one, describe here: GMC Sierra Truck  | le, also report it on Schedule G: Executory Contracts  s, motorcycles  Who has an interest in the property? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another  ☐ Check if this is community property (see instructions)  Who has an interest in the property? Check one. ☑ Debtor 1 only                 | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$ 14,000.00  Do not deduct secured of the amount of any secure Creditors Who Have Clair Creditors | laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.  Current value of the portion you own?  \$ 0.00  Itaims or exemptions. Put ed claims on Schedule D: ims Secured by Property.   |

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Daniel Villareal Case number (# known)

Last Name Middle Name Last Name

| .3.                       | Make:  | Who has an interest in the property? Check one.  | Do not deduct secured cla<br>the amount of any secure   |   |
|---------------------------|--|--|---|---|
|                           | Model:   | Debtor 1 only  | Creditors Who Have Clair  |   |
|                           | Year:  | Debtor 2 only  | Current value of the  | Current value of the  |
|                           |  | Debtor 1 and Debtor 2 only   | entire property?  | portion you own?  |
|                           | Approximate mileage:   | At least one of the debtors and another  |   |   |
|                           | Other information:   | Charle Makin in normalists mannests (200   | \$  | \$  |
|                           |  | ☐ Check if this is community property (see instructions)   |   |   |
|                           |  | i i de la companya di managara di mana   |   |   |
| .4.                       | Make:  | Who has an interest in the property? Check one.  | Do not deduct secured cla   | aims or exemptions. Put   |
|                           | Model:   | Debtor 1 only  | the amount of any secure<br>Creditors Who Have Clain  |   |
|                           |  | Debtor 2 only  | Creditors Who have Clair  | ns secured by Froperty.   |
|                           | Year:  | Debtor 1 and Debtor 2 only   | Current value of the  | Current value of th   |
|                           | Approximate mileage:   | At least one of the debtors and another  | entire property?  | portion you own?  |
|                           | Other information:   |  |   | •   |
|                           |  | ☐ Check if this is community property (see   | \$  | \$  |
|                           |  | instructions)  |   |   |
| an<br>N                   | nples: Boats, trailers, motors, personal o   | and other recreational vehicles, other vehicles, and access watercraft, fishing vessels, snowmobiles, motorcycle accessor  |   |   |
| xan<br>1 N<br>1 Y         | nples: Boats, trailers, motors, personal o   | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only   |   | d claims on <i>Schedule D</i> :   |
|                           | nples: Boats, trailers, motors, personal o es  Make:  Model:   | Who has an interest in the property? Check one.  Debtor 1 only   | Do not deduct secured cla<br>the amount of any secure   | d claims on Schedule D:   |
| kan<br>IN                 | mples: Boats, trailers, motors, personal o es  Make:  Model:  Year:  | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | Do not deduct secured cla<br>the amount of any secure<br>Creditors Who Have Clain   | d claims on Schedule D:<br>ns Secured by Property.  Current value of th   |
| хал<br>1 N<br>1 Y         | mples: Boats, trailers, motors, personal o es  Make:  Model:  Year:  | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  | Do not deduct secured cla<br>the amount of any secure<br>Creditors Who Have Clain   | d claims on Schedule D:<br>ns Secured by Property.  Current value of th<br>portion you own?   |
| Xan<br>N<br>N<br>Y<br>.1. | mples: Boats, trailers, motors, personal or es  Make:  Model:  Year:  Other information:   | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  | Do not deduct secured cla<br>the amount of any secure<br>Creditors Who Have Clain   | d claims on Schedule D: ns Secured by Property.  Current value of th portion you own?  \$   |
| хал<br>1 N<br>1 Y         | mples: Boats, trailers, motors, personal or es  Make:  Model:  Year:  Other information:  own or have more than one, list here   | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  | Do not deduct secured clathe amount of any securer Creditors Who Have Claim  Current value of the entire property?  \$  Do not deduct secured clathe amount of any securer  | d claims on Schedule D: ns Secured by Property.  Current value of th portion you own?  \$   |
| Xan<br>N<br>N<br>Y<br>.1. | mples: Boats, trailers, motors, personal or es  Make: Model: Other information:  own or have more than one, list here Make: Model: Mo | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.   | Do not deduct secured class the amount of any securer Creditors Who Have Claim  Current value of the entire property?  \$  Do not deduct secured class the amount of any securer Creditors Who Have Claim                       | d claims on Schedule D: ns Secured by Property.  Current value of th portion you own?  \$   |
| You                       | mples: Boats, trailers, motors, personal or es  Make:  Model:  Year:  Other information:  own or have more than one, list here   | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only   | Do not deduct secured class the amount of any securer Creditors Who Have Claim  Current value of the entire property?  \$  Do not deduct secured class the amount of any securer Creditors Who Have Claim  Current value of the | d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$  sims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the   |
| YOU                       | mples: Boats, trailers, motors, personal or es  Make: Model: Other information:  own or have more than one, list here Make: Model: Mo | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only                             | Do not deduct secured class the amount of any securer Creditors Who Have Claim  Current value of the entire property?  \$  Do not deduct secured class the amount of any securer Creditors Who Have Claim                       | d claims on Schedule D: ns Secured by Property.  Current value of th portion you own?  \$   |
| Xan<br>N<br>N<br>Y<br>.1. | mples: Boats, trailers, motors, personal or es  Make: Model: Other information:  Own or have more than one, list here Make: Model: Year: Year: Year: Model: Year: Year: Year:  | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only | Do not deduct secured class the amount of any securer Creditors Who Have Claim  Current value of the entire property?  \$  Do not deduct secured class the amount of any securer Creditors Who Have Claim  Current value of the | d claims on Schedule Ins Secured by Property  Current value of a portion you own?  \$  sims or exemptions. Put of claims on Schedule Ins Secured by Property  Current value of a current value of a current value of a consideration. |

Debtor 1

Doc 1 Filed 09/29
Main Document
Villareal

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Desc

Debtor 1

Daniel First Name

Middle Name

Last Name

Case number (if known)

| Do you own or have any legal or equitable interest in any of the following items?  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
|--|---|
| 6. Household goods and furnishings   |   |
| Examples: Major appliances, furniture, linens, china, kitchenware  |   |
| □ No □ Yes. Describe  Household Goods and Furnishings  | \$500.00  |
| 7. Electronics   |   |
| Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; collections; electronic devices including cell phones, cameras, media players, games                           | music   |
| No Tolivinian  |   |
| Yes. DescribeTelivision  | \$  |
| 3. Collectibles of value   |   |
| Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  No                    |   |
| Yes, Describe  | \$  |
|  | <del></del>   |
| <ol> <li>Equipment for sports and hobbies</li> <li>Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; and kayaks; carpentry tools; musical instruments</li> </ol> | canoes  |
| ☑ No □ Yes. Describe   | \$  |
| 100. Boombo  | Φ   |
| 10. Firearms   |   |
| Examples: Pistols, rifles, shotguns, ammunition, and related equipment   |   |
| ☑ No   | •   |
| Yes. Describe  | \$  |
| 11. Clothes  |   |
| Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories   |   |
| No Personal Clothing   | 000.00  |
| Yes. Describe Personal Clothing  | \$  |
|  |   |
| 12. Jewelry<br>Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, g<br>gold, silver  | gems,   |
| ☑ Yes. Describe  | \$  |
| 13. Non-farm animals  Examples: Dogs, cats, birds, horses  |   |
| ☑ No ☐ Yes. Describe   | \$  |
|  |   |
| 14. Any other personal and household items you did not already list, including any health aids you did not   | t list  |
| ■ Yes. Give specific   |   |
| information  | \$  |
| 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached   | s 950.00  |
| for Part 3. Write that number here   | → \* <u></u>  |

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Debtor 1

| Dan | iel |
|-----|-----|
|     |     |

First Name

Case number (if known)\_

|  | p | ari | t | 4 |
|--|---|-----|---|---|
|--|---|-----|---|---|

### Describe Your Financial Assets

| Do you own or have any   | legal or equitable interest in  | any of the following?  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
|--|---|--|--|
| 16. <b>Cash</b> <i>Examples:</i> Money you h                           | nave in your wallet, in your hom                                      | ne, in a safe deposit box, and on hand when you file your petition   |  |
| <b>☑</b> No  |   |  |  |
| ☐ Yes  |   | Cash:  | ····· \$   |
| 17. <b>Deposits of money</b> <i>Examples:</i> Checking, s and other si | avings, or other financial accou<br>milar institutions. If you have m | ints; certificates of deposit; shares in credit unions, brokerage hous<br>ultiple accounts with the same institution, list each. | ses,   |
| No Yes   |   | Institution name:  |  |
|  | 17.1. Checking account:   | Wells Fargo #8994  | s 250.00   |
|  | _   | Dank of America #5597  | 0.00   |
|  | 17.2. Checking account:   |  |  |
|  | 17.3. Savings account:  |  |  |
|  | 17.4. Savings account:  |  | \$   |
|  | 17.5. Certificates of deposit:  |  | \$   |
|  | 17.6. Other financial account:  |  | \$   |
|  | 17.7. Other financial account:  |  | \$   |
|  | 17.8. Other financial account:  |  | \$   |
|  | 17.9. Other financial account:  |  | <b></b> \$   |
|  | or publicly traded stocks   |  |  |
| Examples: Bond funds,  No  | investment accounts with brok   | erage firms, money market accounts   |  |
| Yes  | Institution or issuer name:   |  |  |
|  |   |  | \$   |
|  |   |  | \$   |
|  |   |  | \$ <u> </u>  |
|  |   |  |  |
| 19. Non-publicly traded s<br>an LLC, partnership, a                    | <del>-</del>  | rated and unincorporated businesses, including an interest ir  | •  |
| <b>☑</b> No  | Name of entity:   | % of ownership:  |  |
| Yes. Give specific information about                                   |   | %  | \$   |
| them   |   | %  | \$   |
|  |   | %  | \$   |

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| O  | water hands and other possible and non-negatiable instruments   |          |
|--|---|----------|
| -  | rate bonds and other negotiable and non-negotiable instruments  nclude personal checks, cashiers' checks, promissory notes, and money orders.   |          |
| Non-negotiable instrume  | nts are those you cannot transfer to someone by signing or delivering them.   |          |
| ☑ No   |   |          |
| Yes. Give specific   | Issuer name:  |          |
| information about them   |   | \$       |
|  |   | \$       |
|  |   | \$       |
| Retirement or pension :  | accounts  |          |
|  | RA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans   |          |
| ☑ No   |   |          |
| Yes. List each   | Time of account. Institution power.   |          |
| account separately.  |   | \$       |
|  | 401(k) or similar plan:   | \$       |
|  | Pension plan:   | \$       |
|  | IRA:  | \$<br>\$ |
|  | Retirement account:   | \$       |
|  | Keogh:  Additional account:   | \$       |
|  |   |          |
|  |   |          |
|  | Additional account:   | \$       |
| Your share of all unused<br>Examples: Agreements v<br>companies, or others     |   | <b>5</b> |
| Your share of all unused Examples: Agreements vompanies, or others  No         | orepayments deposits you have made so that you may continue service or use from a company   | \$       |
| Your share of all unused Examples: Agreements vompanies, or others  No         | orepayments deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications   |          |
| Your share of all unused Examples: Agreements vompanies, or others  No         | deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  | \$\$     |
| Your share of all unused Examples: Agreements vompanies, or others  No         | orepayments deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  Electric:   |          |
| Your share of all unused Examples: Agreements vompanies, or others  No         | deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  Electric:  Gas:   |          |
| Your share of all unused Examples: Agreements vompanies, or others  No         | deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  Electric:  Gas:  Heating oil:   |          |
| Your share of all unused Examples: Agreements vompanies, or others  No         | deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:   |          |
| Your share of all unused Examples: Agreements vompanies, or others  No         | prepayments deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  |          |
| Your share of all unused Examples: Agreements vompanies, or others  No         | deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  |          |
| Your share of all unused<br>Examples: Agreements v<br>companies, or others  No | deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:                                  |          |
|  | deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented furniture:               |          |
| Your share of all unused Examples: Agreements we companies, or others  No Yes  | corepayments deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  Electric:  Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: |          |
| Your share of all unused Examples: Agreements vicompanies, or others  No Yes   | deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented furniture:               |          |
| Your share of all unused Examples: Agreements we companies, or others  No Yes  | corepayments deposits you have made so that you may continue service or use from a company with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications  Institution name or individual:  Electric:  Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: |          |

Filed 09/29/17 Entered 09/29/17 11:18:06 Case 6:17-bk-18166-WJ Doc 1 Page 17 of 57 Main Document Daniel Debtor 1 First Name 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No. ☐ Yes ..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ No Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No No Yes. Give specific information about them.... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No No ☐ Yes. Give specific information about them.... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you **1** No ☐ Yes. Give specific information Federal: about them, including whether State: you already filed the returns and the tax years..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement:

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation,

Social Security benefits; unpaid loans you made to someone else

No No

Yes. Give specific information.....

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|---------------------|--|--|--|--|
| Debtor 1            | First Name Middle Name   | Last Name  | Case number (if known)                           |  |
|                     |  |  |  |  |
|                     | sts in insurance policies<br>les: Health, disability, or life insura                                 | ance; health savings account (HSA  | ); credit, homeowner's, or renter's insurance    |  |
| 🛮 No                |  |  |  |  |
| ☐ Yes               | s. Name the insurance company of each policy and list its value.                                     | Company name:  | Beneficiary:                                     | Surrender or refund value:   |
|                     |  |  |  | _ \$   |
|                     |  |  |  | \$   |
|                     |  |  |  | _ \$   |
| If you a<br>propert | terest in property that is due youre the beneficiary of a living trust, by because someone has died. |  | nce policy, or are currently entitled to receive |  |
| ☑ No                |  |  |  |  |
| ☐ Yes               | s. Give specific information   |  |  | :<br>: <b>\$</b> _   |
|                     |  |  |  |  |
|                     |  | or not you have filed a lawsuit or<br>ttes, insurance claims, or rights to s |  |  |
|                     | s. Describe each claim   |  |  |  |
| to set              | off claims   |  | ounterclaims of the debtor and rights            | \$   |
| 5. <b>Any fin</b>   | nancial assets you did not alread  | dy list  |  |  |
| ☑ No                |  |  |  |  |
| ☐ Yes               | s. Give specific information   |  |  | \$   |
|                     |  |  |  |  |
|                     | e dollar value of all of your entr   | ries from Part 4, including any en   | ntries for pages you have attached               | s 250.00   |
|                     |  |  |  |  |
| Part 5:             | Describe Any Business  | -Related Property You O  | wn or Have an Interest In. List any              | real estate in Part 1  |
| 7. <b>Do yo</b> u   | ı own or have any legal or equit   | able interest in any business-rel  | ated property?                                   |  |
| No.                 | . Go to Part 6.  |  |  |  |
| ☐ Ye                | s. Go to line 38.  |  |  |  |
|                     |  |  |  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| o Acce              | nte roccivable or commissions  | vou already carned   |  |  |
|                     | nts receivable or commissions  | you alreauy earlieu  |  |  |
| <b>☑</b> No         | s. Describe  |  |  |  |
| Ye:                 | s. Describe  |  |  | _  |

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☐ Yes. Describe......

✓ No

39. Office equipment, furnishings, and supplies

|                    | Case 6:17-<br>Daniel | -bk-18166-W           |                  | Filed 09/2<br>Document<br>Villareal |              | Entered 09/29<br>19 of 57 |                 |                               |                        |
|--------------------|----------------------|-----------------------|------------------|-------------------------------------|--------------|---------------------------|-----------------|-------------------------------|------------------------|
| Debtor 1           | First Name           | Middle Name           | Last Name        | Villarcai                           |              | Case number (if know      | n)              |                               |                        |
|                    |                      |                       |                  |                                     |              |                           |                 |                               |                        |
| 10. <b>Machi</b> r | nery, fixtures, e    | quipment, supplie     | s you use in b   | usiness, and too                    | ls of your   | trade                     |                 |                               |                        |
| <b>☑</b> No        |                      |                       | •                | •                                   |              |                           |                 |                               |                        |
|                    | s. Describe          |                       |                  |                                     |              |                           |                 | •                             |                        |
| <b></b> 10         | s. Describe          |                       |                  |                                     |              |                           |                 | <b>a</b>                      |                        |
|                    |                      |                       |                  |                                     |              |                           |                 |                               |                        |
| 11. Invent         | ory                  |                       |                  |                                     |              |                           |                 |                               |                        |
| ☑ No               | 1                    |                       |                  |                                     |              |                           |                 |                               |                        |
| ☐ Ye               | s. Describe          |                       |                  |                                     |              |                           |                 | \$                            |                        |
|                    |                      |                       |                  |                                     |              |                           |                 |                               |                        |
| 42. Interes        | sts in partnersh     | ips or joint ventur   | es               |                                     |              |                           |                 |                               |                        |
| <b>☑</b> No        |                      |                       |                  |                                     |              |                           |                 |                               |                        |
|                    |                      | Name of entity:       |                  |                                     |              | 9/                        | 6 of ownership: |                               |                        |
|                    |                      |                       |                  |                                     |              |                           | %               | ¢                             |                        |
|                    |                      |                       |                  |                                     |              |                           | %               |                               |                        |
|                    |                      |                       |                  |                                     |              |                           | ^<br>%          | \$                            |                        |
|                    |                      |                       |                  |                                     |              |                           | 76              | Ψ                             |                        |
| 42 Cueto           | mar liete mailir     | ng lists, or other co | mnilations       |                                     |              |                           |                 |                               |                        |
| 43. Custon         |                      | ig lists, or other co | omphations       |                                     |              |                           |                 |                               |                        |
|                    |                      | include personall     | y identifiable i | nformation (as d                    | efined in 11 | I U.S.C. § 101(41A))?     |                 |                               |                        |
|                    | □ No                 | •                     | •                | ·                                   |              |                           |                 |                               |                        |
|                    | Yes. Desc            | cribe                 |                  |                                     |              |                           |                 |                               |                        |
|                    |                      |                       |                  |                                     |              |                           |                 | \$                            |                        |
|                    |                      |                       |                  |                                     |              |                           |                 |                               |                        |
|                    |                      | property you did      | not already list | :                                   |              |                           |                 |                               |                        |
| <b>₩</b> No        |                      |                       |                  |                                     |              |                           |                 |                               |                        |
|                    | s. Give specific     |                       |                  |                                     |              |                           |                 | \$                            |                        |
|                    | omation              |                       |                  |                                     |              |                           |                 | \$                            |                        |
|                    |                      |                       |                  |                                     |              |                           |                 | \$                            |                        |
|                    |                      |                       |                  | ,                                   | **           |                           |                 | œ.                            |                        |
|                    |                      |                       |                  |                                     |              |                           |                 | Φ                             | _,                     |
|                    |                      |                       |                  |                                     |              |                           |                 | \$                            |                        |
|                    |                      |                       |                  |                                     |              |                           |                 | \$                            |                        |
|                    |                      |                       |                  |                                     | atulaa fau m | anna vau bava attac       | had             |                               | 0.00                   |
| 45. Add ti         | ne dollar value      | of all of your entri  | es from Part 5,  | including any e                     | ntries for p | pages you have attac      | <b>-&gt;</b>    | \$                            | 0.00                   |
| iorra              | iit 5. Write that    | Humber Here           |                  |                                     | ••••••       | •••••                     |                 | L                             |                        |
|                    |                      |                       |                  |                                     |              |                           |                 |                               |                        |
|                    | I                    | 5 6                   |                  | skina Bolotod                       | Droporty     | You Own or Have           | an Interest     | ln.                           |                        |
| Part 6:            | If you own o         | r have an interest    | in farmland, lis | st it in Part 1.                    | riopeity     | Tou Own or mare           |                 |                               |                        |
|                    |                      |                       |                  |                                     |              |                           |                 |                               |                        |
| 46. <b>Do vo</b>   | u own or have a      | any legal or equita   | ble interest in  | any farm- or con                    | nmercial fi  | shing-related proper      | ty?             |                               |                        |
|                    | o. Go to Part 7.     |                       |                  |                                     |              |                           |                 |                               |                        |
| ☐ Ye               | es. Go to line 47.   |                       |                  |                                     |              |                           |                 |                               |                        |
|                    |                      |                       |                  |                                     |              |                           |                 | Current val                   |                        |
|                    |                      |                       |                  |                                     |              |                           |                 | portion you                   |                        |
|                    |                      |                       |                  |                                     |              |                           |                 | Do not deduc<br>or exemptions | t secured claims<br>s. |
| 47. <b>Farm</b>    | animals              |                       |                  |                                     |              |                           |                 | •                             |                        |
|                    |                      | poultry, farm-raised  | fish             |                                     |              |                           |                 |                               |                        |
| ■ N                |                      |                       |                  |                                     |              |                           |                 |                               |                        |
|                    | es                   |                       |                  |                                     |              | *                         |                 |                               |                        |
|                    |                      |                       |                  |                                     |              |                           |                 | ¢                             |                        |
|                    |                      |                       |                  |                                     |              |                           |                 | Φ                             |                        |

Main Document Page 20 of 57 Daniel Debtor 1 First Name 48. Crops-either growing or harvested No No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade **☑** No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ✓ No ☐ Yes..... 51. Any farm- and commercial fishing-related property you did not already list ☑ No ☐ Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached 0.00 for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Yes. Give specific information..... 0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... List the Totals of Each Part of this Form Part 8: 19,000.00 55. Part 1: Total real estate, line 2 2,000.00 56. Part 2: Total vehicles, line 5 950.00 57. Part 3: Total personal and household items, line 15 250.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 3,200.00 3,200.00 Copy personal property total 62. Total personal property. Add lines 56 through 61. ..... 22,200.00 63. Total of all property on Schedule A/B. Add line 55 + line 62.....

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Doc 1

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| information to ide    | ntify your case:                                      |  |
|-----------------------|---|--|
| Daniel                |   | Villareal  |
| First Name            | Middle Name   | Last Name  |
|                       |   |  |
| g) First Name         | Middle Name   | Last Name  |
| s Bankruptcy Court fo | or the: Central District                              | of California  |
|                       |   |  |
| er                    |   |  |
| 1                     | Daniel First Name g) First Name s Bankruptcy Court fo | g) First Name Middle Name  g) First Name Middle Name  s Bankruptcy Court for the: Central District |

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

### Part 1: Identify the Property You Claim as Exempt

| hich set of exemptions are | you claiming? Check one only | , even if your spouse is filing with you.               |
|----------------------------|------------------------------|---|
|                            | hich set of exemptions are   | hich set of exemptions are you claiming? Check one only |

- ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| 2. | For any propert                                     | y you list on <i>Schedule A/B</i> th                      | nat you claim as exemp               | ot, iii iii tile iinoimation below.  |                                    |
|----|---|---|--------------------------------------|--|------------------------------------|
|    | Brief description                                   | on of the property and line on<br>hat lists this property | Current value of the portion you own | Amount of the exemption you claim  | Specific laws that allow exemption |
|    |   | •   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption.   |                                    |
|    | Brief<br>description:<br>Line from<br>Schedule A/B: | 1978 Mobile Home  | <u>\$19,000.00</u>                   | ■ \$\frac{19,000.00}{100% of fair market value, up to any applicable statutory limit | C.C.P.403.140(B)(1)                |
|    | Brief description: Line from Schedule A/B:          | GMC Truck   | \$ <u>2,000.00</u>                   | ■ \$ 2,000.00  100% of fair market value, up to any applicable statutory limit       | C.C.P.403.140(B)(2)                |
|    | Brief description: Line from Schedule A/B:          | Household items   | \$ <u>750.00</u>                     | ■ 100% of fair market value, up to any applicable statutory limit                    | C.C.P.403.140(B)(3)                |
| 3. | (Subject to adju                                    |   | years after that for case            | es filed on or after the date of adjustment  1,215 days before you filed this case?  | .)                                 |

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Debtor 1

Villareal Daniel Last Name First Name Middle Name

Case number (if known)\_

### **Additional Page**

| Brief description                    | on of the property and line<br>/B that lists this property | Current value of the portion you own | Amount of the exemption you claim                                 | Specific laws that allow exemption |
|--------------------------------------|--|--------------------------------------|---|------------------------------------|
|                                      |  | Copy the value from Schedule A/B     | Check only one box for each exemption                             |                                    |
| Brief                                | Personal Clothing  | \$200.00                             | <b>☑</b> \$200.00   | C.C.P.703.140.(B)(3)               |
| description: Line from Schedule A/B: | В  |                                      | ☐ 100% of fair market value, up to any applicable statutory limit | O O D 702 440/BVE\                 |
| Brief description:                   | Wells Fargo Checking                                       | \$250.00                             | <b>☑</b> \$ 250.00  | C.C.P.703.140(B)(5)                |
| Line from<br>Schedule A/B:           | <u>B</u>   |                                      | any applicable statutory limit                                    |                                    |
| Brief<br>description:                |  | \$                                   | □ \$<br>□ 100% of fair market value, up to                        |                                    |
| Line from<br>Schedule A/B:           |  |                                      | any applicable statutory limit                                    |                                    |
| Brief description:                   |  | \$                                   | \$<br>100% of fair market value, up to                            |                                    |
| Line from<br>Schedule A/B:           |  |                                      | any applicable statutory limit                                    |                                    |
| Brief<br>description:                |  | \$                                   | □ \$<br>□ 100% of fair market value, up to                        |                                    |
| Line from<br>Schedule A/B:           |  |                                      | any applicable statutory limit                                    |                                    |
| Brief<br>description:                |  | \$                                   | \$<br>100% of fair market value, up to                            |                                    |
| Line from<br>Schedule A/B:           |  |                                      | any applicable statutory limit                                    |                                    |
| Brief<br>description:                |  | \$                                   | \$<br>100% of fair market value, up to                            |                                    |
| Line from<br>Schedule A/B:           |  |                                      | any applicable statutory limit                                    |                                    |
| Brief description:                   |  | \$                                   | \$<br>100% of fair market value, up to                            |                                    |
| Line from<br>Schedule A/B:           |  |                                      | any applicable statutory limit                                    |                                    |
| Brief<br>description:                |  | \$                                   | \$<br>100% of fair market value, up to                            |                                    |
| Line from<br>Schedule A/B:           | . ——   |                                      | any applicable statutory limit                                    |                                    |
| Brief<br>description:                |  | \$                                   | \$<br>100% of fair market value, up to                            |                                    |
| Line from<br>Schedule A/B            | :  |                                      | any applicable statutory limit                                    |                                    |
| Brief description:                   |  | \$                                   | \$ to 100% of fair market value, up to                            |                                    |
| Line from<br>Schedule A/B            | :  |                                      | any applicable statutory limit                                    |                                    |
| Brief<br>description:                |  | \$                                   | \$ \$ \$  |                                    |
| Line from<br>Schedule A/B            | :  |                                      | any applicable statutory limit                                    |                                    |

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| Fill in this information to identify your case  |  |  |  |   |
|---|--|--|--|---|
| Daniel Daniel   | Villareal  |  |  |   |
| Debtor 1 Daniel First Name Middle Na  |  |  |  |   |
| Debtor 2 (Spouse if filing) First Name Middle Na  | me Last Name   |  |  |   |
| (Opodoo) ii iiiiig) Tiiaiiii  |  |  |  |   |
| United States Bankruptcy Court for the: Central   | District of Camorna  |  |  |   |
| Case number(If known)   |  |  | ☐ Check if amende  |   |
|   |  |  | <b>4</b>   | - ······ <b>J</b>                                     |
| Official Form 106D  |  |  |  |   |
|   | S Who Have Claims Secure   | d by Prop  | erty   | 12/15   |
| information. If more space is needed, copy additional pages, write your name and cas  1. Do any creditors have claims secured by  |  | ing attach it to this i  | onn. On the top or t   | any   |
| Part 1: List All Secured Claims   |  |  |  |   |
| List all secured claims. If a creditor has me for each claim. If more than one creditor has me the company of the company of the creditor has me the company of the co | nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. nabetical order according to the creditor's name. | Column A  Amount of claim  Do not deduct the value of collateral.  | Column B Value of collateral that supports this claim                              | Column C Unsecured portion If any                     |
| 24  |  | s 15,116.00  | s 14,000.00  | 1,116.00  |
| Wells Fargo Dealer Svc  | Describe the property that secures the claim: 2014 Chevrolet Camaro  | <b>3</b>   | Ψ  |   |
| PO Box 25341  | 2014 Cheviolet Camaro  |  |  |   |
| Number Street   |  | .]   |  |   |
|   | As of the date you file, the claim is: Check all that apply.  ☐ Contingent   |  |  |   |
| Santa Ana CA 92799  | Unliquidated   |  |  |   |
| City State ZIP Code   | Disputed   |  |  |   |
| Who owes the debt? Check one.   | Nature of lien. Check all that apply.  |  |  |   |
| Debtor 1 only   | An agreement you made (such as mortgage or secured   |  |  |   |
| Debtor 2 only   | car loan)  |  |  |   |
| Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit  |  |  |   |
| At least one of the debtors and another   | □ Judgment lien from a lawsuit     □ Other (including a right to offset)   | _  |  |   |
| ☐ Check if this claim relates to a  | - Other (modeling a name of the  |  |  |   |
| community debt  | Last 4 digits of account number 4 1 5 0  |  |  |   |
| Date debt was incurred  2.2   | Describe the property that secures the claim:  | Sammer de la company de la<br>Sammer de la company de la | S  | \$  |
| Creditor's Name   | Describe the property that occurs the transfer   | Yester 1 1 1   |  |   |
|   | _  |  |  |   |
| Number Street   | As of the date you file, the claim is: Check all that apply  | •  |  |   |
|   | Contingent   |  |  |   |
|   | ☐ Unliquidated   |  |  |   |
| City State ZIP Code   | ☐ Disputed   |  |  |   |
| Who owes the debt? Check one.   | Nature of lien. Check all that apply.  |  |  |   |
| Debtor 1 only   | An agreement you made (such as mortgage or secured   |  |  |   |
| Debtor 2 only   | car loan)  Statutory lien (such as tax lien, mechanic's lien)  |  |  |   |
| Debtor 1 and Debtor 2 only  | ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit  |  |  |   |
| At least one of the debtors and another   | Other (including a right to offset)  | <del>_</del>   |  |   |
| ☐ Check if this claim relates to a community debt  Date debt was incurred   | Last 4 digits of account number  |  | gga ngalatikaliya gyerna kilikan ar waannin kata tari tari kanan ii filimus taka a | on diplomations on the strong and a strong strike the |
|   | Column A on this page. Write that number here:   | \$ 15,116.00   | 0  |   |

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|               | Mai  | n Document Page 24 of 57   | 7   |   |
|---------------|--|--|---|---|
| Filli         | n this information to identify your case:  |  |   |   |
|               | Daniel   | Villareal  |   |   |
| Debt          | First Name Middle Name   | Last Name  |   |   |
| Debt          | or 2 use, if filing) First Name Middle Name  | Last Name  |   |   |
|               | ed States Bankruptcy Court for the: Central District of  | California   |   |   |
| Unite         | ed States Bankrupicy Court for the. Certifial District of the  | Samornia   |   | Check if this is an   |
|               | e number<br>nown)  |  | а   | mended filing   |
| Offi          | icial Form 106E/F  |  |   |   |
| Sc            | hedule E/F: Creditors W  | ho Have Unsecured (  | Claims  | 12/15   |
| A/B: I        | complete and accurate as possible. Use Part in the other party to any executory contracts or under the party (Official Form 106A/B) and on Schedutors with partially secured claims that are listeded, copy the Part you need, fill it out, number the diditional pages, write your name and case nur  | expired leases that could result in a claim<br>le G: Executory Contracts and Unexpired<br>I in Schedule D: Creditors Who Have Claim<br>ne entries in the boxes on the left. Attach to<br>her (if known).   | Leases (Official Form 106G). Do<br>ns Secured by Property. If more                          | not include any space is  |
| Part          | 1: List All of Your PRIORITY Unsecure  | d Claims   |   |   |
| 1. D          | o any creditors have priority unsecured claims   | against you?   |   |   |
|               | No. Go to Part 2.  |  |   |   |
| L             | Yes.  Ist all of your priority unsecured claims. If a creater that is a creater than the creater that is a creater than the c | ditor has more than one priority unsecured C   | laim list the creditor separately for   | each claim. For   |
| e:<br>ne<br>u | ach claim listed, identify what type of claim it is. If i<br>onpriority amounts. As much as possible, list the c<br>nsecured claims, fill out the Continuation Page of I   | a claim has both prionty and nonpriority amou<br>aims in alphabetical order according to the c<br>Part 1. If more than one creditor holds a partic   | reditor's name. If you have more th<br>cular claim, list the other creditors in             | an two priority   |
| (F            | For an explanation of each type of claim, see the in   | istructions for this form in the instruction book  | Total claim Priori  |   |
|               |  |  | amou  | nt amount   |
| 2.1           |  | Last 4 digits of account number  | \$\$  | \$  |
|               | Priority Creditor's Name   | When was the debt incurred?  |   |   |
|               | Number Street  | when was the dept incurred:  |   |   |
|               |  | As of the date you file, the claim is: Check a   | all that apply.   |   |
|               | City State ZIP Code  | ☐ Contingent   |   |   |
|               | Who incurred the debt? Check one.  | Unliquidated   |   |   |
|               | Debtor 1 only  | Disputed   |   |   |
|               | Debtor 2 only  | Type of PRIORITY unsecured claim:  |   |   |
|               | Debtor 1 and Debtor 2 only   | Domestic support obligations   |   |   |
|               | At least one of the debtors and another  | Taxes and certain other debts you owe the  |   |   |
|               | Check if this claim is for a community debt  | Claims for death or personal injury while you intoxicated  | were  |   |
|               | Is the claim subject to offset?  | Other. Specify   | <u> </u>  |   |
|               |  | in in a magnetic and a supplication of the common and a supplication of the common points of the designation of the common such as the common supplication of the common supplication o | MANDE COMMUNICATION (COMPETE - 1977年) 1897年 になっている は大きなアファイン よっぱん かかまま かんかいしゅう 不成れない マード・バス | gan pan ana angan manggan na manggan panggan ang milipin ana ant ana ang managgan ang manggan panggan ang man |
| 2.2           | いい 東京では、京内内で、アン・ログロングでしょう (中でインス) アイヤング マップ (アイアングライン・ア・カイ) 上面では、アイヤング (中でイング) アイヤング (中でイング) 海水 かいかいかいかい アイト・アイング (中でイング) 海水 かいかいかい アイド・アイト・アイト・アイト・アイト・アイト・アイト・アイト・アイト・アイト・アイト  | Last 4 digits of account number  |   |   |
|               | Priority Creditor's Name   | When was the debt incurred?  |   |   |
|               | Number Street  |  | war a l   |   |
|               |  | As of the date you file, the claim is: Check   | all that apply.   |   |
|               |  | Contingent   |   |   |
|               | City State ZIP Code  | ☐ Unliquidated☐ Disputed   |   |   |
|               | Who incurred the debt? Check one.  |  |   |   |
|               | Debtor 1 only Debtor 2 only  | Type of PRIORITY unsecured claim:  |   |   |
|               | Debtor 1 and Debtor 2 only   | Domestic support obligations   | covernment  |   |
|               | At least one of the debtors and another  | Taxes and certain other debts you owe the  |   |   |
|               | ☐ Check if this claim is for a community debt  | <ul> <li>Claims for death or personal injury while yo<br/>intoxicated</li> </ul>   | 3 WOLG  |   |
|               | Is the claim subject to offset?  | Other. Specify   |   |   |

Yes

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Debtor 1

First Name

| listing any entries on this page, number them  | beginning with 2.3, followed by 2.4, and so forth.   | Total claim  | Priority<br>amount   | Nonprior<br>amount  |
|--|--|--|--|---|
|  | Last 4 digits of account number  | \$   | \$   | \$  |
| riority Creditor's Name  | When was the debt incurred?  |  |  |   |
| Number Street  | As of the date you file, the claim is: Check all that apply.   |  |  |   |
|  | ☐ Contingent   |  |  |   |
| Sity State ZIP Code  | Unliquidated Disputed  |  |  |   |
| Who incurred the debt? Check one.  | Type of PRIORITY unsecured claim:  |  |  |   |
| Debtor 1 only  | ••   |  |  |   |
| Debtor 2 only Debtor 1 and Debtor 2 only   | Domestic support obligations   |  |  |   |
| At least one of the debtors and another  At least one of the debtors and another   | ☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were     |  |  |   |
|  | intoxicated  |  |  |   |
| ☐ Check if this claim is for a community debt  | Other. Specify   |  |  |   |
| S the claim subject to onser:  |  |  |  |   |
| Yes  | рынатарабын тарын тарын басарын энген тарын жага жага жага жага жага жага жага жаг                             | energija (sie 1870) prophysiowych (spielem och die spielem och die spielem och die spielem och die spielem och | aci জন মাজকারণাক্তন ভানক সংগ্রিক স্থানি বিশ্ববিদ্যালয় স্থ | - S-witzenhefern-Obert von Es. gran                       |
|  | Last 4 digits of account number  | \$   | \$   | \$  |
| Priority Creditor's Name   | When was the debt incurred?  |  |  |   |
| Number Street  | When was the dept incurred?  |  |  |   |
|  | As of the date you file, the claim is: Check all that apply.   |  |  |   |
|  | ☐ Contingent   |  |  |   |
| City State ZIP Code  | Unliquidated   |  |  |   |
| City Carlo   | Disputed   |  |  |   |
| Who incurred the debt? Check one.  |  |  |  |   |
| Debtor 1 only  | Type of PRIORITY unsecured claim:  |  |  |   |
| Debtor 2 only  | ■ Domestic support obligations   |  |  |   |
| Debtor 1 and Debtor 2 only   | ☐ Taxes and certain other debts you owe the government   |  |  |   |
| At least one of the debtors and another  | Claims for death or personal injury while you were   |  |  |   |
| ☐ Check if this claim is for a community debt  | intoxicated  Other. Specify  |  |  |   |
| Is the claim subject to offset?  |  |  |  |   |
| □ No □ Yes   | managan dan pangangan kanggan kanggan kanggan kanggan dan panggan kanggan kanggan kanggan kanggan kanggan kang | C. Makasala - Andropologica, meleszychomographychie spo-   | ngang kis kis sanggarawa nije sangwalif i ngalaban naha    | -ing the digression, faithful at this with the set of the |
| Commission American (complete Control of the State State State State Control of the Control of t | Last 4 digits of account number  | \$   | \$   | \$  |
| Priority Creditor's Name   | When was the debt incurred?  |  |  |   |
| Number Street  | As of the date you file, the claim is: Check all that apply  | <i>.</i>   |  |   |
|  | Contingent   |  |  |   |
| City State ZIP Code  | ☐ Unliquidated   |  |  |   |
|  | ☐ Disputed   |  |  |   |
| Who incurred the debt? Check one.  |  |  |  |   |
| Debtor 1 only  | Type of PRIORITY unsecured claim:  |  |  |   |
| Debtor 2 only  | ☐ Domestic support obligations   |  |  |   |
| Debtor 1 and Debtor 2 only   | Taxes and certain other debts you owe the government   |  |  |   |
| At least one of the debtors and another  | Claims for death or personal injury while you were interior and.   | and the majority and probability of the polytocolle  | ukranopo, pries in un de estastantes i mentel (1997)       | gengas was constantive com                                |
| ☐ Check if this claim is for a community debt  | intoxicated  Other. Specify  | -  |  |   |
| Is the claim subject to offset?  |  |  |  |   |
| □ No   |  |  |  |   |

Doc 1 Filed 09/29/17 Entered 09/29/17 11:18:06 Desc Case 6:17-bk-18166-WJ Page 26 of 57 Main **Document** Debtor 1 Middle Name **List All of Your NONPRIORITY Unsecured Claims** Part 2: 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Last 4 digits of account number 1 5 0 6 CircleBack Lending Inc. 21,120.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 1719 Number OR 97207 **Portland** As of the date you file, the claim is: Check all that apply. ZIP Code Contingent Who incurred the debt? Check one. Unliquidated Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other Specify Unsecured Loan ☐ No Yes 6,600.00 Last 4 digits of account number 3 6 1 Capital One When was the debt incurred? Nonpriority Creditor's Name 26525 N Riverwoods BLVD As of the date you file, the claim is: Check all that apply. 60045 Mettawa IL State ZIP Code Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify Credit Card ☐ No ☐ Yes **CBNA** Last 4 digits of account number 2 4 3 6 2,000.00 Nonpriority Creditor's Name 04/01/2015 When was the debt incurred? PO Box 6497 Number SD Sioux Falls 57117 As of the date you file, the claim is: Check all that apply. ZIP Code Contingent Who incurred the debt? Check one. ■ Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ■ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ☐ No Other. Specify ☐ Yes

Doc 1 Filed 09/29/17 Entered 09/29/17 11:18:06 Case 6:17-bk-18166-WJ Page 27 of 57 Main Pacyment Debtor 1 Your NONPRIORITY Unsecured Claims — Continuation Page Part 2: **Total claim** After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. Last 4 digits of account number 3 9 1 7 3,000.00 Chase Card/Amazon Nonpriority Creditor's Name 11/01/2010 When was the debt incurred? PO Box 15298 Number Street As of the date you file, the claim is: Check all that apply. 19850 DE Wilmington ZIP Code ☐ Contingent State Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Is the claim subject to offset? **Ø** No ☐ Yes Last 4 digits of account number 6 3 8 1 \$ 1,500.00 Syncb/Jcp 11/01/2014 Nonpriority Creditor's Name When was the debt incurred? PO box 965007 As of the date you file, the claim is: Check all that apply. Number Street 32896 FL Orlando Contingent 7IP Code State City Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only Student loans Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims ☐ Check if this claim is for a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Is the claim subject to offset? ☐ No Yes \$ 3,000.00 Last 4 digits of account number 1 2 8 3 Syncb/Lowes 04/01/2015 Nonpriority Creditor's Name When was the debt incurred? PO Box 965005 As of the date you file, the claim is: Check all that apply. Number 32896 FL Orlando ZIP Code Contingent State Unliquidated Who incurred the debt? Check one. ☐ Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Debtor 1 and Debtor 2 only ■ Student loans Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims ☐ Check if this claim is for a community debt

Debts to pension or profit-sharing plans, and other similar debts

Other, Specify Credit Card

☐ No ☐ Yes

Is the claim subject to offset?

Debtor 1

| Pa | rt | 2: |
|----|----|----|

ur NONPRIORITY Unsecured Claims — Continuation Page

| fter listing any entries on thi   | s page, number then   | n beginning with   | 4.4, followed by 4.5, and so forth.  | Total claim  |
|---|---|--|--|--|
| Syncb/Walmart   |   |  | Last 4 digits of account number 4 3 4 0  | \$ 750.00  |
| Nonpriority Creditor's Name   |   | -  | When was the debt incurred? 05/01/2015   |  |
| PO Box 965024   |   |  | when was the dept incurred?  |  |
| Number Street Orlando   | FL  | 32896  | As of the date you file, the claim is: Check all that apply.   |  |
| City  | State   | ZIP Code   | Contingent   |  |
| Who incurred the debt? Ch   | eck one.  |  | ☐ Unliquidated ☐ Disputed  |  |
| Debtor 1 only   |   |  | Type of NONDDIODITY unprocured claim:  |  |
| Debtor 2 only   |   |  | Type of NONPRIORITY unsecured claim:   |  |
| Debtor 1 and Debtor 2 only  At least one of the debtors   |   |  | <ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>                            |  |
|   |   |  | you did not report as priority claims  |  |
| Check if this claim is fo   | or a community debt   |  | Debts to pension or profit-sharing plans, and other similar debts  |  |
| Is the claim subject to offs  | et?   |  | Other. Specify Credit Card   |  |
| ☑ No<br>☐ Yes   |   |  |  | elec-place consistency on the second consistency of the second consist |
| ्रकृत हो हो क्षा क्षित्र विकास नाम स्थापन अवश्वित विकास को क्षा किया है है। इसकार के अधिकार के अधिकार के अधिकार | is, paragon — quidantis e es promovamente en 1377 e pre moy 25 de 1946 de 1966 de 1966 de 1966 de | economic com providente di Senti Anti-Anti (di come il Anti-Anti). | Last 4 digits of account number 3 3 5 4  | \$ 6,000.0   |
| Nonpriority Creditor's Name   |   |  |  |  |
| PO Box 47504  |   |  | When was the debt incurred? 09/01/2015   |  |
| Number Street   |   |  | As of the date you file, the claim is: Check all that apply.   |  |
| San Antonio   | TX  | 78265  |  |  |
| City  | State   | ZIP Code   | ☐ Contingent   |  |
| Who incurred the debt? C  | heck one  |  | ☐ Unliquidated ☐ Disputed  |  |
| Debtor 1 only   | ncon one.   |  | C Disputed   |  |
| Debtor 2 only   |   |  | Type of NONPRIORITY unsecured claim:   |  |
| Debtor 1 and Debtor 2 on  | ly  |  | ☐ Student loans  |  |
| At least one of the debtor  |   |  | Obligations arising out of a separation agreement or divorce that  |  |
| Check if this claim is f  | or a community debt   |  | you did not report as priority claims  |  |
|   |   |  | <ul> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify <u>Credit Card</u></li> </ul> |  |
| Is the claim subject to off   | set?  |  | Other. Specify Ordan Cara  |  |
| ☐ No<br>☐ Yes   |   |  |  |  |
| uner am notice helderger trekkellen des Amelikelse kan til 1944 som helde i 1944 som helden. All                | tryky tysik negodio kugi i "Byžordelovstoco o "stalegodelako linti tota 1995.čel histotionista    | ong katika ordaning nga natahunga sa namara sa na Ameri            | Last 4 digits of account number 4 1 2 7  | <u>\$ 14,000.0</u>   |
| Wells Fargo Card Sv   | /C  |  |  |  |
| Nonpriority Creditor's Name PO Box 14517  |   |  | When was the debt incurred? $04/01/2011$   |  |
| Number Street Des Moines  | IA  | 50306  | As of the date you file, the claim is: Check all that apply.   |  |
| City  | State   | ZIP Code   | Contingent   |  |
|   |   |  | Unliquidated   |  |
| Who incurred the debt?  | Check one.  |  | Disputed   |  |
| Debtor 1 only   |   |  | Type of NONPRIORITY unsecured claim:   |  |
| Debtor 2 only   | <b>.</b> l  |  | <u></u>  |  |
| ☐ Debtor 1 and Debtor 2 or ☐ At least one of the debtor   |   |  | <ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>                            |  |
|   |   |  | you did not report as priority claims  |  |
| ☐ Check if this claim is  | for a community debt  |  | Debts to pension or profit-sharing plans, and other similar debts  |  |
| Is the claim subject to of  | fset?   |  | ☑ Other. Specify Credit Card   |  |
| ☐ No<br>☐ Yes   |   |  |  |  |

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Debtor 1

First Name

Middle Name

| <b>Part</b> | 2: |
|-------------|----|

Your NONPRIORITY Unsecured Claims — Continuation Page

Last Name

| r listing any entries on this page, number th   | em beginning with  | a 4.4, followed by 4.5, and so forth.  | Total claim  |
|---|--|--|--|
| Wells Fargo PLL   |  | Last 4 digits of account number 7 6 7 1  | \$ <u>10,000.0</u>   |
| Nonpriority Creditor's Name PO Box 94435  |  | When was the debt incurred? 06/01/2014   |  |
| Number Street Albuquerque NM  | 87199  | As of the date you file, the claim is: Check all that apply.   |  |
| City State  | ZIP Code   | Contingent   |  |
| Who incurred the debt? Check one.   |  | Unliquidated   |  |
| Debtor 1 only   |  | ☐ Disputed   |  |
| Debtor 2 only   |  | Type of NONPRIORITY unsecured claim:   |  |
| Debtor 1 and Debtor 2 only  |  | Student loans  |  |
| ☐ At least one of the debtors and another   |  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |  |
| ☐ Check if this claim is for a community deb  | t  | Debts to pension or profit-sharing plans, and other similar debts  |  |
| Is the claim subject to offset?   |  | ☑ Other Specify Line of Credit   |  |
| ☑ No<br>□ Yes   |  |  |  |
| ട്രങ്ങൾ പ്രതിരുത്തിലെ വാഗത്തു ( ഇപ്പോലം വരുവുന്ന് ആവാ വരും വിവയില്ല വിവാത്ത്യവുന്നു. വിവാരത്ത്യവഴെ അക്രമ്മിൽ ഉഷ്ട വാവ | eligi kipingana na Ari dinigasi and darah tagam taga na taga na taga kipinga kipin na taga kipin na taga na ta | Last 4 digits of account number  | s de la companya de l |
| Nonpriority Creditor's Name   |  | <del></del>  |  |
|   |  | When was the debt incurred?  |  |
| Number Street   |  | As of the date you file, the claim is: Check all that apply.   |  |
| City State  | ZIP Code   | ☐ Contingent   |  |
| Who incurred the debt? Check one.   |  | ☐ Unliquidated ☐ Disputed  |  |
| Debtor 1 only   |  | - Sisperior  |  |
| Debtor 2 only   |  | Type of <b>NONPRIORITY</b> unsecured claim:  |  |
| Debtor 1 and Debtor 2 only  |  | ☐ Student loans  |  |
| At least one of the debtors and another   |  | Obligations arising out of a separation agreement or divorce that  |  |
| ☐ Check if this claim is for a community del  | ot   | you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts   |  |
| Is the claim subject to offset?   |  | Other. Specify   |  |
| □ No  |  |  |  |
| Yes   |  | and the second of the country on any one of polygone makes (1) the object of the second of the country of the second of the country of the second of the sec | i garinakiliyadi istoloogid Szarrozza takor  |
| den til de se en vill det generationer blad til det end til englid de demokratie en ett de til en de ende til e       |  | Last 4 digits of account number  | \$   |
| Nonpriority Creditor's Name   |  | When was the debt incurred?  |  |
| Number Street   |  | As of the date you file, the claim is: Check all that apply.   |  |
| City State  | ZIP Code   | Contingent   |  |
| AND a transport the debto Objections  |  | Unliquidated   |  |
| Who incurred the debt? Check one.   |  | ☐ Disputed   |  |
| Debtor 1 only Debtor 2 only   |  | Type of NONPRIORITY unsecured claim:   |  |
| Debtor 2 only Debtor 1 and Debtor 2 only  |  | ☐ Student loans  |  |
| At least one of the debtors and another   |  | <ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>  |  |
| ☐ Check if this claim is for a community de   | bt   | you did not report as priority claims  |  |
|   | ~-   | <ul><li>Debts to pension or profit-sharing plans, and other similar debts</li><li>Other. Specify <u>Credit Card</u></li></ul>  |  |
| Is the claim subject to offset?   |  | Other. Specify Credit Card   |  |
| □ No □ Yes  |  |  |  |

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Main **Apply**ment

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Debtor 1

Part 4:

**Daniel** First Name

Last Name

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|              |              |   |     | Total claim |           |
|--------------|--------------|---|-----|-------------|-----------|
| Total claims | 6a.          | Domestic support obligations  | 6a. | \$          | 0.00      |
| from Part 1  |              | Taxes and certain other debts you owe the government  | 6b. | \$          | 0.00      |
|              | 6c.          | Claims for death or personal injury while you were intoxicated  | 6c. | \$          | 0.00      |
|              |              | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | +\$         | 0.00      |
|              | 6e.          | Total. Add lines 6a through 6d.   | 6e. | \$          | 0.00      |
|              |              |   |     | Total claim |           |
| Total claims | 6f.          | Student loans   | 6f. | \$          | 0.00      |
| from Part 2  | og. Oi<br>or | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$          | 0.00      |
|              | 6h.          | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$          | 0.00      |
|              | 6i.          | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | + \$        | 67,970.00 |
|              | 6j. ˈ        | Total. Add lines 6f through 6i.   | 6j. | \$          | 67,970.00 |

| Fill in th   | his information to id   | dentify your cas                   | se:   |  |                |
|--|---|------------------------------------|---|--|----------------|
|  |   | , ,                                | Villareal   |  |                |
| Debtor   | Daniel<br>First Name  | Middle I                           |   |  |                |
| Debtor 2<br>(Spouse if   | f filing) First Name  | Middle I                           | Name Łast Name  |  |                |
| United S   | tates Bankruptcy Court  | for the: Central                   | District of California  |  |                |
| Case nu  |   |                                    |   | ☐ Chec   | k if this is a |
| (if known  | )   | <u></u>                            |   | amen   | ded filing     |
| Offici   | al Form 106   | SG.                                |   |  |                |
|  |   |                                    | ry Contracts ar   | d Unexpired Leases   | 12/15          |
| 1. Doy   | you have any exect<br>No. Check this box a<br>Yes. Fill in all of the   | utory contracts and file this form | or unexpired leases? with the court with your other so we even if the contracts or leases | number the entries, and attach it to this page. On the top the hedules. You have nothing else to report on this form. are listed on Schedule A/B: Property (Official Form 106A/B). Property of the instruction booklet for more examples of executory of the instruction booklet for more examples of executory. | for (for       |
|  |   |                                    |   |  |                |
| Per  | son or company wi   | ith whom you h                     | ave the contract or lease   | State what the contract or lease is for  |                |
|  | son or company wi   |                                    |   | Mobile Home Space Rental   |                |
| 2.1 Go<br>Nar  | olden Coach Mol   | bile Home Es                       |   |  |                |
| 2.1 Go<br>Nar<br>11<br>Nur   | olden Coach Mol<br>me<br>414 Serra Road<br>mber Street  | bile Home Es                       | tates   |  |                |
| 2.1 Go<br>Nar<br>11<br>Nur<br>Ap   | olden Coach Mol<br>me<br>414 Serra Road<br>mber Street<br>ople Valley   | bile Home Es                       | tates<br>92308  |  |                |
| 2.1 Go<br>Nar<br>11<br>Nur<br>Ap<br>City   | olden Coach Mol<br>me<br>414 Serra Road<br>mber Street<br>ople Valley   | bile Home Es                       | tates   |  |                |
| 2.1 Go<br>Nar<br>11<br>Nur<br>Ap<br>City   | olden Coach Mol<br>me<br>414 Serra Road<br>mber Street<br>ople Valley   | bile Home Es                       | tates<br>92308  |  |                |
| 2.1 GC<br>Nar<br>111<br>Nur<br>Ap<br>City  | olden Coach Mol<br>me<br>414 Serra Road<br>mber Street<br>ople Valley   | bile Home Es                       | tates<br>92308  |  |                |
| 2.1 GC<br>Nar<br>111<br>Nur<br>Ap<br>City  | olden Coach Mol<br>me<br>414 Serra Road<br>mber Street<br>ople Valley   | bile Home Es                       | tates<br>92308  |  |                |
| 2.1 GC<br>Nar<br>11<br>Nur<br>Ap<br>City<br>2.2 Nar  | olden Coach Mol   | bile Home Es                       | tates<br>92308  |  |                |
| 2.1 GC<br>Nar<br>111<br>Nur<br>Ap<br>City<br>2.2 Nar<br>Nur<br>2.3   | olden Coach Mol   | cA<br>State                        | 92308<br>ZIP Code   |  |                |
| 2.1 GC<br>Nar<br>111<br>Nur<br>Ap<br>City<br>2.2 Nar<br>Nur<br>2.3   | olden Coach Mol   | cA<br>State                        | 92308<br>ZIP Code   |  |                |
| 2.1 GC<br>Nar<br>111<br>Nur<br>Ap<br>City<br>2.2 Nar<br>Nur<br>2.3   | olden Coach Mol   | cA<br>State                        | 92308<br>ZIP Code   |  |                |
| 2.1 GC<br>Nar<br>111<br>Nur<br>Ap<br>City<br>2.2 Nar<br>Nur<br>2.3   | olden Coach Mol   | cA<br>State                        | 92308<br>ZIP Code   |  |                |
| 2.1 Go<br>Nar<br>111<br>Nur<br>Ap<br>City<br>2.2 Nar<br>Nur<br>City<br>2.3 Nar<br>2.4  | olden Coach Mol   | CA<br>State                        | 92308 ZIP Code  |  |                |
| 2.1 Go Nar 111 Nur Ap City 2.2 Nar Nur City 2.3 Nar Nu Cit   | olden Coach Mol   | CA<br>State                        | 92308 ZIP Code  |  |                |
| 2.1 Go Nar 111 Nur Ap City 2.2 Nar Nur City 2.3 Nar Nu Cit 2.4 Na  | olden Coach Mol   | CA<br>State                        | 92308 ZIP Code  |  |                |
| 2.1 GC<br>Nar<br>111<br>Nur<br>Ap<br>City<br>2.2 Nar<br>Nur<br>2.3 Nar<br>Nur<br>2.4 Na  | me 414 Serra Road mber Street pple Valley  me mber Street  proper Street  mber Street  grame  mber Street  grame  mber Street | CA<br>State                        | 92308 ZIP Code  |  |                |
| 2.1 GC Nar 11 Nur Ap City City 2.2 Nar Nu City 2.3 Na Nu City 2.4 Na Nu City 2.4 Na Nu City City 2.4 Na Nu City City City City City City City City | me 414 Serra Road mber Street pple Valley  me mber Street  proper Street  mber Street  grame  mber Street  grame  mber Street | CA State  State                    | 92308 ZIP Code  ZIP Code  |  |                |
| 2.1 GC Nar 11 Nur Ap City 2.2 Nar Nur City 2.3 Nar Nu Cit 2.4 Na Nu Cit 2.5  | me 414 Serra Road mber Street pple Valley  me mber Street  proper Street  mber Street  grame  mber Street  grame  mber Street | CA State  State                    | 92308 ZIP Code  ZIP Code  |  |                |

ZIP Code

State

City

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| Fill in                       | this information to i  | dentify your case:   |   |  |      |
|-------------------------------|--|--|---|--|------|
|                               |  | Villareal  |   |  |      |
| Debtor                        | 1 Daniel First Name  | Middle Name Last Nam   | е   |  |      |
| Debtor<br>(Spouse             | 2<br>e, if filing) First Name  | Middle Name Last Nam   | e   |  |      |
|                               |  | for the: Central District of California  |   |  |      |
|                               | number   |  |   |  |      |
| (If know                      |  |  |   | Check if this  |      |
|                               |  |  |   | amended filii  | ng   |
| Offic                         | cial Form 106  | SH_  |   |  |      |
| Sch                           | edule H: Y   | our Codebtors  |   | 12   | /15  |
| are filir<br>and nu<br>case n | ng together, both are<br>mber the entries in t<br>umber (if known). Ar | equally responsible for supplying corn<br>he boxes on the left. Attach the Additions<br>reswer every question. | ect information. If r<br>nal Page to this pag | as complete and accurate as possible. If two married proof is needed, copy the Additional Page, fill it age. On the top of any Additional Pages, write your name.  | out, |
|                               | you have any codel<br>No   | otors? (If you are filing a joint case, do not   | list either spouse as                         | as a codebtor.)  |      |
|                               | Yes  |  |   |  |      |
| 2. W                          | ithin the last 8 years   | , have you lived in a community proper   | ty state or territory                         | (? (Community property states and territories include  |      |
| _                             |  | no, Louisiana, Nevada, New Mexico, Puert   | o Rico, Texas, wasi                           | strington, and wisconsin.)   |      |
|                               | No. Go to line 3.<br>Yes. Did vour spous                               | se, former spouse, or legal equivalent live  | with you at the time?                         | ?  |      |
| _                             | □ No   |  | -   |  |      |
|                               |  | ommunity state or territory did you live?  |   | Fill in the name and current address of that person.   |      |
|                               |  |  |   |  |      |
|                               | Name of your spous   | e, former spouse, or legal equivalent  |   | _  |      |
|                               | Number Stre  | eet  |   | _  |      |
|                               |  |  |   |  |      |
|                               | City   | State  | ZIP Code                                      |  |      |
| sl<br>Se                      | hown in line 2 again<br>chedule D (Official F                          | as a codebtor only if that person is a gu  | arantor or cosigne                            | or if your spouse is filing with you. List the person<br>er. Make sure you have listed the creditor on<br>Jule G (Official Form 106G). Use Schedule D,   |      |
| (                             | Column 1: Your code  | btor   |   | Column 2: The creditor to whom you owe the d   | lebt |
|                               |  |  |   | Check all schedules that apply:  |      |
| 3.1                           |  |  |   | Schedule D, line   |      |
|                               | Name   |  |   | Schedule E/F, line   |      |
|                               | Number Street  |  |   | ☐ Schedule G, line   |      |
|                               | City   | State  | ZIP Code                                      |  |      |
| 3.2                           | Olly .   |  |   |  |      |
|                               | Name   |  |   | Schedule D, line   |      |
|                               |  |  |   | Schedule E/F, line   |      |
|                               | Number Street  |  |   | ☐ Schedule G, line   |      |
|                               | City   | State  | ZIP Code                                      | The state of the s |      |
| 3.3                           |  |  |   | Schedule D, line   |      |
|                               | Name   |  |   | Schedule E/F, line   |      |
|                               | Number Street  |  |   | ☐ Schedule G, line   |      |
|                               | City   | State  | ZIP Code                                      |  |      |
|                               | v av   |  |   |  |      |

| Fill in this information to identify   | / your case:   |   |                 |                              |  |
|--|--|---|-----------------|------------------------------|--|
|  |  |   |                 |                              |  |
| Debtor 1 Daniel First Name   | Villa<br>Middle Name   | Last Name                                 |                 | -                            |  |
| Debtor 2<br>(Spouse, if filing) First Name   | Middle Name  | Last Name                                 |                 | -                            |  |
| United States Bankruptcy Court for the:  | Central District of Cal  | ifornia                                   |                 |                              |  |
| Case number  |  |   |                 | Check if t                   | his is:  |
| (If known)   |  |   |                 |                              | nended filing  |
|  |  |   |                 | •                            | plement showing postpetition chapter 13 e as of the following date:  |
| Official Form 106I   | _  |   |                 | MM / [                       | DD / YYYY  |
| Schedule I: You  | ur Income  |   |                 |                              | 12/15  |
| supplying correct information. If y  | you are married and not fil<br>use is not filing with you,<br>se top of any additional pag | ing jointly, and yo<br>do not include inf | ur spo<br>ormat | ouse is living with your spo | or 2), both are equally responsible for you, include information about your spouse. buse. If more space is needed, attach a known). Answer every question. |
| Fill in your employment information.   |  | Debtor 1                                  |                 |                              | Debtor 2 or non-filing spouse  |
| If you have more than one job, attach a separate page with information about additional employers.                             | Employment status  | ☐ Employed ☑ Not employe                  | ed              |                              | Employed Not employed  |
| Include part-time, seasonal, or self-employed work.  |  |   |                 |                              |  |
| Occupation may include student or homemaker, if it applies.  | Occupation   |   |                 |                              | ·  |
|  | Employer's name  |   |                 |                              |  |
|  | Employer's address   | Number Street                             |                 |                              | Number Street  |
|  | How long employed the  | City                                      | State           | e ZIP Code                   | City State ZIP Code  |
| Part 2: Give Details Abou  | nt Monthly Income  |   |                 |                              |  |
| Estimate monthly income as of spouse unless you are separate If you or your non-filing spouse I below. If you need more space, | d.<br>nave more than one employe   | er, combine the info                      |                 |                              | rite \$0 in the space. Include your non-filing for that person on the lines  |
|  |  |   |                 | For Debtor 1                 | For Debtor 2 or non-filing spouse  |
| <ol><li>List monthly gross wages, sa<br/>deductions). If not paid monthly</li></ol>  |  |   | 2.              | \$                           | \$   |
| 3. Estimate and list monthly over  | ertime pay.  |   | 3.              | +\$                          | + \$   |
| 4. Calculate gross income. Add   | line 2 + line 3.   |   | 4.              | \$0.00                       | \$   |

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| Debtor 1                | Daniel First Name Middle Nar  | Case number (# known)  |                  |                        |  |                       |                            |                        | <del></del>               |      |                    |
|-------------------------|---|--|------------------|------------------------|--|-----------------------|----------------------------|------------------------|---------------------------|------|--------------------|
|                         | ,   |  |                  | Fo                     | r Debtor   | 1                     | For Deb                    | otor 2 or<br>ng spouse | No.                       |      |                    |
| Сору                    | line 4 here   |  | 4.               | \$_                    |  | _0.00                 | \$                         |                        | -                         |      |                    |
| 5. List a               | Il payroll deductions:  |  |                  |                        |  |                       |                            |                        |                           |      |                    |
| 5a. 1                   | Tax, Medicare, and Soci   | al Security deductions   | 5a.              | \$_                    |  |                       | \$                         |                        | _                         |      |                    |
|                         | Mandatory contribution  |  | 5b.              | \$_                    |  |                       | \$                         |                        |                           |      |                    |
|                         | Voluntary contributions   |  | 5c.              | \$_                    |  |                       | \$                         |                        |                           |      |                    |
|                         | Required repayments of  |  | 5d.              | \$_                    | ····   |                       | \$                         |                        | -                         |      |                    |
| 5e. I                   | Insurance   |  | 5e.              | \$_                    |  |                       | \$                         |                        | -                         |      |                    |
| 5f. 1                   | Domestic support oblig  | ations   | 5f.              | \$_                    |  |                       | \$                         |                        | -                         |      |                    |
| 5g. <sup>(</sup>        | Union dues  |  | 5g.              | \$_                    |  |                       | \$                         |                        | -                         |      |                    |
| 5h.                     | Other deductions. Spec  | ify:   | 5h.              | +\$_                   |  | <del></del>           | + \$                       |                        |                           |      |                    |
| 6. Add                  | the payroll deductions.   | . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.  | 6.               | \$_                    | <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del> |                       | \$                         |                        | -                         |      |                    |
| 7. Calc                 | culate total monthly take   | e-home pay. Subtract line 6 from line 4.   | 7.               | \$_                    |  | 0.00                  | ) \$                       |                        | -                         |      |                    |
| 8. <b>List</b> 8        | all other income regular  | ly received:   |                  |                        |  |                       |                            |                        |                           |      |                    |
|                         | profession, or farm   | property and from operating a business,  |                  |                        |  |                       |                            |                        |                           |      |                    |
|                         | Attach a statement for ea receipts, ordinary and ne-<br>monthly net income. | ch property and business showing gross<br>cessary business expenses, and the total   | 8a.              | \$_                    |  | <u>0</u> .00          | \$                         |                        | -                         |      |                    |
|                         | Interest and dividends  |  | 8b.              | \$_                    |  | 0.00                  | ) \$                       |                        | _                         |      |                    |
|                         | Family support paymen regularly receive                                     | its that you, a non-filing spouse, or a dependent  | ent              |                        |  |                       |                            |                        |                           |      |                    |
|                         | Include alimony, spousal settlement, and property                           | support, child support, maintenance, divorce settlement.   | 8c.              | \$_                    |  | 0.0                   | T                          |                        | -                         |      |                    |
|                         | Unemployment comper   | nsation  | 8d.              | \$_                    |  | 0.0                   | · -                        |                        | -                         |      |                    |
| 8e.                     | Social Security   |  | 8e.              | \$_                    | 1  | <u>.81</u> 7.0        | 0 \$                       |                        | _                         |      |                    |
|                         | Include cash assistance a<br>that you receive, such as                      | stance that you regularly receive<br>and the value (if known) of any non-cash assistar<br>food stamps (benefits under the Supplemental<br>gram) or housing subsidies.<br>rs Assistance | nce<br>8f.       | \$_                    | 1  | <u>,42</u> 3.4        | 0 \$                       |                        | <del>-</del> -            |      |                    |
|                         |   |  | 8g.              | œ                      |  |                       | ¢                          |                        |                           |      |                    |
| - 3-                    | Pension or retirement in  |  | _                |                        |  |                       | Ψ                          |                        | -                         |      |                    |
|                         |   | Specify:ines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 8h.<br>9.        | + \$_                  | 3,2  | 40.40                 | + <u>\$</u><br>  <u>\$</u> |                        |                           |      |                    |
| 10. <b>Caic</b><br>Add  | ulate monthly income. A   | Add line 7 + line 9.<br>Debtor 1 and Debtor 2 or non-filing spouse.  | 10               | ). <b>\$</b> _         | 3,24   | 40.40                 | \$                         |                        | _                         | \$   | 3,240.4            |
| inclu                   | e all other regular contr<br>ude contributions from an<br>uds or relatives. | ibutions to the expenses that you list in Sche<br>unmarried partner, members of your household,  | dule<br>your     | J.<br>depen            | dents, yo  | ur roomi              | nates, ar                  | nd other               |                           |      |                    |
|                         |   | already included in lines 2-10 or amounts that are   |                  |                        |  | expense               | es listed i<br>–           |                        | <i>J.</i><br>i1. <b>+</b> | \$   | 0.0                |
| 12. <b>Add</b><br>Write | I the amount in the last on the that amount on the Sun                      | column of line 10 to the amount in line 11. The<br>nmary of Your Assets and Liabilities and Certain  | e resu<br>Statis | ılt is th<br>stical li | e combin<br>oformation                           | ed mont<br>, if it ap | hly incom<br>plies         | ne.<br>1               | 12.                       | \$   | 3,240.4            |
| Ø                       | you expect an increase No. Yes. Explain:                                    | or decrease within the year after you file this  | form             | 1?                     |  | <u></u>               |                            |                        | ···                       | Comb | ined<br>ily income |

| Fill in this i                 | information to identify                        | your case:   |   |             |   |  |
|--------------------------------|--|--|---|-------------|---|--|
|                                | Daniel   | Villareal  |   |             |   |  |
| Debtor 1                       | First Name                                     | Middle Name Last Name  | Check   | if this is: |   |  |
| Debtor 2<br>(Spouse, if filing | g) First Name                                  | Middle Name Last Name  |   | amended fil | _                                       |  |
| United States                  | Bankruptcy Court for the: (                    | Central District of California   |   |             | the following                           | petition chapter 13<br>date:   |
| Case number                    | ·  |  |   | / DD / YYYY | _                                       |  |
| Official                       | Form 106J                                      |  |   |             |   |  |
| Sche                           | dule J: Yo                                     | ur Expenses  |   |             |   | 12/15  |
| information.                   |  |  |   |             |   |  |
|                                |  | 3511014  |   |             |   |  |
| 1. Is this a jo                |  |  |   |             |   |  |
|                                | o to line 2.<br>oes Debtor 2 live in a s       | separate household?  |   |             |   |  |
|                                | ] No   |  |   |             |   |  |
|                                | Yes. Debtor 2 must file                        | e Official Form 106J-2, Expenses for S   | eparate Household of Debto                          | r 2.        |   | The state of the s |
| -                              | ve dependents? Debtor 1 and                    | <ul><li>✓ No</li><li>✓ Yes. Fill out this information for</li></ul>            | Dependent's relationship to<br>Debtor 1 or Debtor 2 |             | Dependent's<br>age                      | Does dependent live with you?  |
| Debtor 2.                      |  | each dependent   |   | -           | *************************************** | □ No   |
| Do not sta<br>names.           | te the dependents'                             |  |   |             | <del></del>                             | Yes  |
|                                |  |  |   |             | ·                                       | □ No<br>□ Yes  |
|                                |  |  |   |             |   | ☐ Yes  |
|                                |  |  |   |             |   | Yes  |
|                                |  |  |   |             |   | ☐ No   |
|                                |  |  |   |             |   | ☐ Yes  |
|                                |  |  |   |             |   | □ No   |
|                                |  |  |   |             |   | Yes  |
| expenses                       | xpenses include of people other than           | □ No □ Yes   |   |             |   |  |
| yourself a                     | nd your dependents?                            | 103  |   |             |   |  |
| Part 2:                        | stimate Your Ongo                              | ing Monthly Expenses   |   |             |   |  |
| •                              | of a date after the bar                        | bankruptcy filing date unless you a<br>kruptcy is filed. If this is a suppleme | -   |             |   |  |
| Include expe                   | enses paid for with nor                        | n-cash government assistance if you  | know the value of                                   |             |   |  |
|                                |  | d it on Schedule I: Your Income (Offi  |   |             | Your expe                               | nses   |
|                                | al or home ownership of for the ground or lot. | expenses for your residence. Include   | first mortgage payments and                         | d<br>4.     | \$                                      | 700.00   |
|                                | cluded in line 4:                              |  |   |             |   |  |
|                                | al estate taxes                                |  |   | 4a.         |   |  |
|                                | perty, homeowner's, or r                       |  |   | 4b.         |   |  |
|                                | ne maintenance, repair,                        |  |   | 4c.         | \$                                      |  |
| 4d. Hor                        | neowner's association o                        | r condominium dues   |   | 4d.         | \$                                      |  |

Debtor 1 Daniel Villareal Case number (#known)\_\_\_\_\_\_

|     |   | _          | Your expenses    |
|-----|---|------------|------------------|
| 5.  | Additional mortgage payments for your residence, such as home equity loans  | 5.         | \$               |
|     | Utilities:  |            |                  |
| ٥.  | 6a. Electricity, heat, natural gas  | 6a.        | \$ 225.00        |
|     | 6b. Water, sewer, garbage collection  | 6b.        | \$60.00          |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.        | \$ <u>150.00</u> |
|     | 6d. Other. Specify:   | 6d.        | \$               |
| 7.  | Food and housekeeping supplies  | 7.         | \$345.00         |
| 8.  | Childcare and children's education costs  | 8.         | \$               |
| 9.  | Clothing, laundry, and dry cleaning   | 9.         | \$80.00          |
| 10. | Personal care products and services   | 10.        | \$36.00          |
| 11. |   | 11.        | \$117.00         |
| 12. | •   | 12.        | \$100.00         |
|     | Do not include car payments.  |            | ¢                |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.<br>14. | \$ 200.00        |
| 14. | Charitable contributions and religious donations  | 14.        | Ψ                |
| 15. | Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.   |            |                  |
|     | 15a. Life insurance   | 15a.       | \$               |
|     | 15b. Health insurance   | 15b.       | \$               |
|     | 15c. Vehicle insurance  | 15c.       | \$ 133.00        |
|     | 15d. Other insurance. Specify: Renters Insurance  | 15d.       | \$15.00          |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  | 16.        | \$               |
| 17. | installment or lease payments:  |            |                  |
|     | 17a. Car payments for Vehicle 1   | 17a.       | \$458.00         |
|     | 17b. Car payments for Vehicle 2   | 17b.       | \$               |
|     | 17c. Other. Specify:  | 17c.       | \$               |
|     | 17d. Other. Specify:  | 17d.       | \$               |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18.        | \$               |
| 19. | Other payments you make to support others who do not live with you.   |            |                  |
|     | Specify:  | 19.        | \$               |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom   | 10.        |                  |
|     | 20a. Mortgages on other property  | 20a.       | \$               |
|     | 20b. Real estate taxes  | 20b.       | \$               |
|     | 20c. Property, homeowner's, or renter's insurance   | 20c.       | \$               |
|     | 20d. Maintenance, repair, and upkeep expenses   | 20d.       | \$               |
|     | 20e. Homeowner's association or condominium dues  | 20e.       | \$               |

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| Del | otor 1     | Daniel<br>First Name | Middle Name       | Villareal<br>Last Name  |                   | Case number (# known) |  |  |
|-----|------------|----------------------|-------------------|---|-------------------|-----------------------|--|--|
| 21. | Oth        | er. Specify:         |                   |   | ·                 | 21.                   | +\$  |  |
| 22. | Calc       | culate your mon      | thly expenses.    |   |                   |                       |  | The second secon |
|     | 22a.       | . Add lines 4 thro   | ugh 21.           |   |                   | <b>22</b> a.          | \$   | 2,619.00   |
|     | 22b.       | . Copy line 22 (m    | onthly expenses   | for Debtor 2), if any, from Official                                  | Form 106J-2       | 22b.                  | \$   |  |
|     | 22c.       | Add line 22a an      | d 22b. The result | t is your monthly expenses.   |                   | 22c.                  | \$   | 2,619.00   |
|     |            |                      |                   |   |                   |                       | Through a substitute and the control of the control |  |
| 23. | Calc       | ulate your mont      | hly net income.   |   |                   |                       |  | 3,240.40   |
| 2   | 23a.       | Copy line 12 (y      | our combined mo   | onthly income) from Schedule I.                                       |                   | 23a.                  | \$   | 3,240.40   |
| 2   | 23b.       | Copy your mon        | thly expenses fro | om line 22c above.  |                   | 23b.                  | -\$  | 2,619.00   |
| 2   | 23c.       | Subtract your n      | nonthly expenses  | s from your monthly income.   |                   |                       | •  | 621.40   |
|     |            | The result is yo     | ur monthly net in | acome.  |                   | <b>23</b> c.          |  |  |
|     |            |                      |                   |   |                   |                       |  |  |
| 24. | Do y       | ou expect an in      | crease or decre   | ase in your expenses within the                                       | year after you fi | le this form?         |  |  |
|     |            |                      |                   | aying for your car loan within the rease because of a modification to |                   |                       |  |  |
|     | <b>d</b> N |                      |                   |   |                   |                       |  |  |
| -   | ☐ Y        | es. Explain h        | nere:             |   |                   |                       |  |  |

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| Fill in this in                | formation to identify y                        | vour case: Villarea         | al                     |   |                       |
|--------------------------------|--|-----------------------------|------------------------|---|-----------------------|
| Debtor 1                       | Daniel<br>First Name                           |                             | Last Name              |   |                       |
| lebtor 2<br>Spouse, if filing) | First Name                                     | Middle Name I               | Last Name              |   |                       |
| Inited States                  | Bankruptcy Court for the:                      | District of                 | -                      |   |                       |
| Case number<br>If known)       | 1  |                             |                        |   | ☐ Check if this is a  |
|                                |  |                             |                        | J   | amended filing        |
|                                |  |                             |                        |   |                       |
| Officia                        | I Form 106De                                   | eC .                        |                        |   |                       |
| Decl                           | aration A                                      | bout an Indi                | ividual Do             | ebtor's Schedule:                             | S 12/15               |
| If two mar                     | ried neonle are filing t                       | ogether, both are equally i | responsible for supp   | lving correct information.                    |                       |
|                                |  | -                           |                        | chedules. Making a false statement, co        | oncealing property or |
| <b>Did yo</b><br><b>₩</b> No   |  | someone who is NOT an a     | attorney to help you t | ill out bankruptcy forms?                     |                       |
| Ye                             | s. Name of person                              |                             |                        | Attach Bankruptcy Petition Preparer's Notice, | Declaration, and      |
|                                |  |                             |                        | Signature (Official Form 119).                |                       |
|                                | penalty of perjury, I deey are true and correc |                             | summary and sched      | lules filed with this declaration and         |                       |
| *                              | Of tellar                                      | el s                        | د                      |   |                       |
| Signa                          | ture of Debtor 1                               | 1                           | Signature of Debtor 2  |   |                       |
| Date _                         | 9/29/201                                       | 7                           | Date                   | YY  |                       |

| ebtor 1                          | Daniel  |                               |                                       | /illareal   |   |   |   |
|----------------------------------|---|-------------------------------|---------------------------------------|---|---|---|---|
| ebtor 2                          | First Name  |                               | tle Name                              | Last Name   |   |   |   |
|                                  | ng) First Name<br>s Bankruptcy Court for t  |                               | <sub>dle Name</sub><br>ral District o | Last Name   |   |   |   |
| ise numbe                        |   | ne. Octiv                     | ai District C                         |   |   | _   | ) or a state to the   |
| nown)                            |   |                               |                                       |   |   | L.  | Check if this is an amended filing                                |
|                                  |   |                               |                                       |   |   |   |   |
| ficial                           | Form 107  |                               |                                       |   |   |   |   |
|                                  |   | ancia                         | ıl Affaiı                             | rs for Individ  | luals Filing f  | or Bankruptcy   | 4/16  |
| rmation                          | . If more space is n<br>known). Answer eve  | eeded, att<br>ry questic      | tach a separa<br>on.                  | ite sheet to this form.   | On the top of any addi  | lly responsible for supplyir<br>tional pages, write your na | me and case   |
| rt 1:                            |   |                               |                                       | tus and Where You   | Lived Before  |   |   |
|                                  | s your current marita   | al status?                    |                                       |   |   |   |   |
| Mai                              | rried<br>: married  |                               |                                       |   |   |   |   |
|                                  |   |                               |                                       |   |   |   |   |
|                                  |   |                               |                                       |   |   |   |   |
|                                  | the last 3 years, ha  | ve you live                   | ed anywhere                           | other than where you  | live now?   |   |   |
| <b>Y</b> No                      |   |                               |                                       | other than where you  |   |   |   |
| <b>☑</b> No<br>☐ Yes             |   |                               |                                       | vears. Do not include w   |   |   | Dates Debtor 2<br>lived there                                     |
| <b>☑</b> No<br>☐ Yes             | s. List all of the place  |                               |                                       | vears. Do not include w  Dates Debtor 1  lived there                    | here you live now.  |   |   |
| <b>⊻</b> No<br>□ Yes<br><b>D</b> | s. List all of the place: ebtor 1: 1414 Serra Road  | s you lived                   |                                       | vears. Do not include w  Dates Debtor 1  lived there                    | here you live now.  Debtor 2:  Same as Debtor 1   |   | lived there   |
| <b>½</b> No<br>Yes<br><b>D</b>   | s. List all of the place:   | s you lived                   |                                       | vears. Do not include w  Dates Debtor 1  lived there                    | here you live now.  |   | lived there  Same as Debtor 1                                     |
| No Yes                           | s. List all of the place:  ebtor 1:  1414 Serra Road  lumber Street                             | s you lived                   | in the last 3 y                       | Prom 01/01/2017   | here you live now.  Debtor 2:  Same as Debtor 1   |   | Same as Debtor 1  |
| V No Yes                         | s. List all of the place: ebtor 1: 1414 Serra Road  | s you lived<br>d #63<br>CA    |                                       | Prom 01/01/2017   | here you live now.  Debtor 2:  Same as Debtor 1   | State ZIP Code  | Same as Debtor 1  |
| Yes  D  1                        | s. List all of the place:  ebtor 1:  1414 Serra Road  number Street  Apple Valley               | s you lived<br>d #63<br>CA    | 92308                                 | Pates Debtor 1 I lived there  From 01/01/2017 To 10/01/2017             | Debtor 2:  Same as Debtor 1  Number Street  | State ZIP Code  | Same as Debtor 1  |
| Yes D                            | ebtor 1:  1414 Serra Road lumber Street  Apple Valley  City                                     | s you lived<br>d #63<br>CA    | 92308                                 | Pates Debtor 1 I lived there  From 01/01/2017 To 10/01/2017             | Pebtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1  | State ZIP Code  | Same as Debtor 1  From To   |
| W No<br>Yes<br>D                 | s. List all of the place:  ebtor 1:  1414 Serra Road  number Street  Apple Valley               | s you lived<br>d #63<br>CA    | 92308                                 | Pates Debtor 1 I lived there  From 01/01/2017 To 10/01/2017             | Debtor 2:  Same as Debtor 1  Number Street  | State ZIP Code  | Same as Debtor 1  From To  Same as Debtor 1                       |
| Yes D                            | ebtor 1:  1414 Serra Road lumber Street  Apple Valley  City                                     | s you lived<br>d #63<br>CA    | 92308                                 | Pates Debtor 1 I lived there  From 01/01/2017 To 10/01/2017             | Pebtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1  | State ZIP Code  | Same as Debtor 1  From To  Same as Debtor 1  From                 |
| W No<br>Yes<br>D<br>1<br>↑       | ebtor 1:  1414 Serra Road lumber Street  Apple Valley  City                                     | d #63  CA  State              | 92308                                 | Pates Debtor 1 I lived there  From 01/01/2017 To 10/01/2017             | Pebtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1  | State ZIP Code  | Same as Debtor 1  From To  Same as Debtor 1  From                 |
| WY No  Yes  D  1  ↑              | s. List all of the place:  ebtor 1:  1414 Serra Road  number Street  Apple Valley  City  City   | c you lived d #63  CA  State  | 92308 ZIP Code                        | Pates Debtor 1 I lived there  From 01/01/2017 To 10/01/2017  From  From | here you live now.  Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1  Number Street   | State ZIP Code  | Same as Debtor 1  From To  Same as Debtor 1  From Tro Tro Tro     |
| ₩ No D                           | s. List all of the place:  ebtor 1:  1414 Serra Road  number Street  Apple Valley  City  Street | c you lived  d #63  CA  State | 92308 ZIP Code                        | Pouse or legal equiva   | here you live now.  Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1  Number Street   |   | Iived there  Same as Debtor 1  From To  Same as Debtor 1  From To |
| Within states  No  Within states | ebtor 1:  1414 Serra Road Number Street  Apple Valley City  City  the last 8 years, dic         | State  State  Arizona,        | 92308 ZIP Code ZIP Code               | Pouse or legal equiva   | here you live now.  Debtor 2:  Same as Debtor 1  Number Street  City  Same as Debtor 1  Number Street  City  Lent in a community property New Mexico, Puerto Ri | State ZIP Code  | Iived there  Same as Debtor 1  From To  Same as Debtor 1  From To |

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| Debtor 1 | Daniel<br>First Name | Middle Name Last N        | Villareal  | Case nu  | mber (if known)  |  |
|----------|----------------------|---------------------------|--|--|--|--|
|          | rirst Name           | Wildlife Fast I           |  |  |  |  |
| Fill     | n the total amoun    | t of income you received  | t or from operating a bu<br>from all jobs and all busi<br>ome that you receive toget | nesses, including part-tir                                       | r or the two previous cale<br>me activities.<br>er Debtor 1. | ndar years?  |
| Ø        |                      | ta ita                    |  |  |  |  |
| u        | Yes. Fill in the de  | aus.                      | Delator 1  |  | Debtor 2   |  |
|          |                      |                           | Sources of income  | Gross income   | Sources of income  | Gross income   |
|          |                      |                           | Check all that apply.  | (before deductions and exclusions)                               | Check all that apply.  | (before deductions and exclusions)                               |
|          | From January 1       | of current year until     | Wages, commissions,  | \$   | Wages, commissions, bonuses, tips                            | \$   |
|          | the date you file    | ed for bankruptcy:        | bonuses, tips  Operating a business  | <u> </u>   | Operating a business   | <u> </u>   |
|          | For last calenda     | ar year:                  | Wages, commissions,  |  | Wages, commissions,  | ٠  |
|          | (January 1 to De     | cember 31,)               | bonuses, tips  Operating a business  | \$   | bonuses, tips  Operating a business                          | \$   |
|          | For the colonda      | r year before that:       | ☐ Wages, commissions,  |  | ☐ Wages, commissions,  |  |
|          | (January 1 to De     | _                         | bonuses, tips  Operating a business  | \$   | bonuses, tips  Operating a business                          | \$   |
|          |                      |                           | each source separately. D  | o not include income tha   | at you listed in line 4.                                     |  |
|          |                      |                           | Debtor 1   |  | Debtor 2   |  |
|          |                      |                           | Sources of income<br>Describe below.   | Gross income from each source (before deductions and exclusions) | Sources of income<br>Describe below.                         | Gross income from each source (before deductions and exclusions) |
|          | From January         | 1 of current year until   | Social Security  | \$ 21,804.00   |  | - <b>\$</b>  |
|          |                      | ed for bankruptcy:        | VA Assistance  | \$12,810.60  | - Linear Administration                                      | - \$   |
|          |                      |                           |  | \$   |  | - \$   |
|          | For last calend      | lar year:                 | Social Security  | \$32,613.00  |  | - \$   |
|          |                      | ecember 31, <u>2016</u> ) |  | \$   |  | - \$   |
|          |                      | 1111                      |  | \$   |  | - \$   |
|          | For the calend       | ar year before that:      | Social Security  | s 32,613.00  |  | \$   |
|          |                      | ecember 31, <u>2015</u> ) |  | \$   |  | \$   |
|          |                      | YYYY                      |  | \$   |  | \$   |

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| Debtor 1 | Daniel First Name Middle Name Last Nam  | Villareal  | Case num  | iber (if known)                                 |                      |
|----------|---|--|---|---|----------------------|
|          | List Certain Payments You Made  | Potoro Vou Filad (                                 | ior Ranksintov  |   |                      |
| Part 3:  | List Certain Payments You made  | Before You Filed I                                 | or Bankruptcy   |   |                      |
| 6 Are ei | ither Debtor 1's or Debtor 2's debts prin   | narily consumer debts                              | s?  |   |                      |
|          | lo. Neither Debtor 1 nor Debtor 2 has pr  |  |   | defined in 11 U.S.C. § 101(                     | 8) as                |
|          | "incurred by an individual primarily for a  | a personal, family, or ho                          | ousehold purpose."  |   |                      |
|          | During the 90 days before you filed for   | bankruptcy, did you pa                             | y any creditor a total of \$6                             | 5,425* or more?                                 |                      |
|          | No. Go to line 7.   |  |   |   |                      |
|          | Yes. List below each creditor to wh total amount you paid that cre child support and alimony. Als | ditor. Do not include pa<br>o, do not include paym | nyments for domestic supp<br>ents to an attorney for this | oort obligations, such as<br>s bankruptcy case. |                      |
|          | * Subject to adjustment on 4/01/19 and  |  |   | r the date of adjustment.                       |                      |
| Ø Y      | es. Debtor 1 or Debtor 2 or both have pr  | -  |   | 200 or mara?                                    |                      |
|          | During the 90 days before you filed for   | bankrupicy, did you pa                             | y any creditor a total of \$0                             | oo or more!                                     |                      |
|          | No. Go to line 7.   |  |   |   |                      |
|          | Yes. List below each creditor to wh creditor. Do not include paymalimony. Also, do not include    | ents for domestic supp                             | ort obligations, such as ch                               | ild support and                                 |                      |
|          |   | Dates of<br>payment                                | Total amount paid   | Amount you still owe                            | Was this payment for |
|          |   | 07/01/2017   | \$ 1,371.00   | \$15,116.00                                     | Mortgage             |
|          | Creditor's Name   |  |   |   | <b>☑</b> Car         |
|          | Wells Fargo Dealer Svc  | 08/01/2017   |   |   | Credit card          |
|          | Po Box 25041  | 09/01/2017   |   |   | Loan repayment       |
|          |   |  |   |   | Suppliers or vendors |
|          |   | P Code   |   |   | Other                |
|          |   |  |   |   |                      |
|          |   |  | \$  | \$  | ☐ Mortgage           |
|          | Creditor's Name   |  |   |   | ☐ Car                |
|          | Number Street   |  |   |   | ☐ Credit card        |
|          |   |  |   |   | Loan repayment       |
|          |   |  |   |   | Suppliers or vendors |
|          | City State ZI   | P Code   |   |   | Other                |
|          |   |  |   |   |                      |
|          |   |  | \$  | \$  | ☐ Mortgage           |
|          | Creditor's Name   |  |   |   | ☐ Car                |
|          |   |  |   |   | Credit card          |
|          | Number Street   |  |   |   | Loan repayment       |
|          |   |  |   |   | Suppliers or vendors |
|          |   |  |   |   | ☐ Other              |
|          | City State Z  | P Code   |   |   |                      |

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| tor 1                   | Daniel<br>First Name Mid-  | Villa<br>die Name Last Name                               | real                                | -  | Case number (if known)_                       |   |
|-------------------------|--|---|-------------------------------------|--|---|---|
| Inside<br>corpo<br>agen | ers include your rela<br>orations of which you<br>t, including one for a<br>as child support and | business you operate as a s                               | elatives of any<br>on in control, o | general partners; p<br>r owner of 20% or i | eartnerships of which<br>more of their voting | who was an insider?  In you are a general partner;  In securities; and any managing  In domestic support obligations, |
|                         | es. List all payments  | s to an insider.  | Dates of payment                    | Total amount                               | Amount you still owe                          | Reason for this payment   |
|                         | Insider's Name   |   |                                     | \$   | \$  |   |
|                         | made s vame  |   |                                     |  |   |   |
|                         | Number Street  |   |                                     |  |   |   |
|                         |  |   |                                     |  |   |   |
|                         | City   | State ZIP Code  |                                     | \$   | <b>.</b><br>\$                                |   |
|                         | Insider's Name   |   |                                     | Ψ  |   |   |
|                         | Number Street  |   |                                     |  |   |   |
|                         |  | VV  | ·                                   |  |   |   |
|                         | City   | State ZIP Code  |                                     |  |   |   |
| an in<br>Include        | n <b>sider?</b><br>de payments on deb<br>No  | ots guaranteed or cosigned by sthat benefited an insider. |                                     | Total amount<br>paid                       |   | n account of a debt that benefit  Reason for this payment  Include creditor's name                                    |
|                         | Insider's Name   |   | ·                                   | \$   | . \$  |   |
|                         | Number Street  |   |                                     |  |   |   |
|                         | City   | State ZIP Code  |                                     |  |   |   |
|                         |  |   |                                     | \$   | <b>\$</b>                                     |   |
|                         | Insider's Name   |   |                                     | ,  |   |   |
|                         | Number Street  |   | ·                                   |  |   |   |
|                         |  |   |                                     |  |   |   |
|                         | Chi  | State 7tD Code  | •                                   |  |   |   |

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| ebtor 1  | Daniel   |                    |                   | areal                 | Case num                              | ber (if known) |  |                           |
|----------|--|--------------------|-------------------|-----------------------|---------------------------------------|----------------|--|---------------------------|
|          | First Name   | Middle Name        | Last Name         |                       |                                       |                |  |                           |
| _        |  |                    |                   |                       |                                       |                |  |                           |
| Part 4   | ldentify L   | egal Actions,      | Repossession      | s, and Foreclosur     | es                                    |                |  |                           |
| With     | nin 1 year befo  | re you filed for b | ankruptcy, wer    | e you a party in any  | awsuit, court action,                 | or adminis     | strative proced  | eding?                    |
|          |  |                    | nal injury cases, | small claims actions, | divorces, collection su               | its, paternit  | y actions, supp  | ort or custody modificati |
|          | contract disput  | es.                |                   |                       |                                       |                |  |                           |
|          |  |                    |                   |                       |                                       |                |  |                           |
| <b>U</b> | Yes. Fill in the o   | details.           | ••                |                       |                                       |                |  | Status of the case        |
|          |  |                    | Natur             | of the case           | Court or ager                         | icy            |  | Status of the case        |
|          |  |                    |                   |                       |                                       |                | and the state of t | Pending                   |
|          | Case title   |                    |                   |                       | Court Name                            |                |  | On appeal                 |
|          |  |                    | <del></del>       |                       |                                       | ,              |  | Concluded                 |
|          |  |                    |                   |                       | Number Street                         |                |  | Concluded                 |
|          | Case number  |                    |                   |                       | City                                  | State          | ZIP Code   |                           |
|          |  |                    |                   |                       |                                       | State          | ZIF ÇOQE   |                           |
|          |  |                    |                   |                       |                                       |                |  | П., "                     |
|          | Case title   |                    |                   |                       | Court Name                            | ,              |  | Pending                   |
|          |  |                    |                   |                       |                                       |                |  | On appeal                 |
|          |  |                    |                   | •                     | Number Street                         |                |  | Concluded                 |
|          | Case number  |                    |                   |                       | City                                  | State          | ZIP Code   |                           |
|          |  |                    |                   |                       |                                       |                |  |                           |
|          | Yes. Fill in the i   | nformation below   |                   | Describe the prope    | ertv :                                |                | Date   | Value of the propert      |
|          |  |                    |                   | bescribe the prope    | · · ·                                 |                | Dute   | varue of the property     |
|          |  |                    |                   |                       |                                       |                |  | \$                        |
|          | Creditor's Na  | ime                |                   |                       |                                       |                |  | -                         |
|          | Number S   | treet              |                   | <br>Explain what happ | ened                                  |                |  |                           |
|          | reditibor 0  | 1000               |                   |                       |                                       |                |  |                           |
|          |  |                    |                   |                       | s repossessed.                        |                |  |                           |
|          |  |                    |                   | Property was          |                                       |                |  |                           |
|          | City   | St                 | ate ZIP Code      | _                     | s attached, seized, or I              | evied.         |  |                           |
|          | <b></b>  |                    |                   | Describe the prop     |                                       |                | Date   | Value of the propert      |
|          |  |                    |                   | Describe the brope    | si Ly                                 |                | Date   | value of the propert      |
|          |  |                    |                   |                       |                                       |                |  |                           |
|          |  |                    |                   | <del></del>           |                                       |                | <del></del>  | <u> </u>                  |
|          | Creditor's Na  | ime                |                   |                       |                                       |                |  |                           |
|          | Name of the last o |                    |                   |                       | · · · · · · · · · · · · · · · · · · · |                |  |                           |
|          | Number S   | treet              |                   | Explain what happ     | ened                                  |                |  |                           |
|          |  |                    |                   | _ Property was        | s repossessed.                        |                |  |                           |
|          |  |                    |                   | Property was          |                                       |                |  |                           |
|          |  |                    |                   | - Property was        |                                       |                |  |                           |
|          | City   | St                 | ate ZIP Code      |                       | s attached, seized, or l              | evied.         |  |                           |
|          |  |                    |                   |                       | ,,                                    |                |  |                           |

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| r 1                                       | Daniel   |  | V                  | illareal              |                     | Case number (ii | f known)    |                            |                      |     |
|---|--|--|--------------------|-----------------------|---------------------|-----------------|-------------|----------------------------|----------------------|-----|
| •   | First Name   | Middle Name  | Last Name          |                       |                     |                 |             |                            |                      |     |
|   |  |  |                    |                       |                     |                 |             |                            |                      |     |
|   |  |  |                    |                       |                     |                 | 41441       |                            | amanuta fram 1       |     |
| Withi                                     | in 90 days befo  | ore you filed for  | bankruptcy,        | did any creditor, i   | ncluding a bank     | or financial in | nstitution, | , set off any              | amounts from y       | our |
|   |  | to make a payn   | nent because       | you owed a debt?      |                     |                 |             |                            |                      |     |
| <b>y</b> N                                |  |  |                    |                       |                     |                 |             |                            |                      |     |
| ☐ Y                                       | es. Fill in the de   | etails.  |                    |                       |                     |                 |             |                            |                      |     |
|   |  |  | De                 | scribe the action the | creditor took       |                 |             | Date action                | Amount               |     |
|   |  |  |                    |                       |                     |                 | •           | vas taken                  |                      |     |
| Cr  | reditor's Name   |  |                    |                       |                     |                 |             |                            |                      |     |
|   |  |  |                    |                       |                     |                 |             |                            | \$                   |     |
| Nu  | umber Street   |  |                    |                       |                     |                 |             |                            | - Ψ                  |     |
|   |  |  |                    |                       |                     |                 |             |                            |                      |     |
| _   |  |  |                    |                       |                     |                 |             |                            |                      |     |
|   |  |  |                    |                       |                     |                 |             |                            |                      |     |
| Ci  | ity  | State ZI   | IP Code La         | st 4 digits of accou  | nt number: XXXX     | (- <u> </u>     |             |                            |                      |     |
| □ N                                       | lo   | ppointed record  |                    | an, or another offi   | •                   |                 |             |                            |                      |     |
| <b>⊸</b> Y                                | 62   |  |                    |                       |                     |                 |             |                            |                      |     |
| rt 5:                                     | I 1 104 00-4-  | in Gifts and C   | antribution        | _                     |                     |                 |             |                            |                      |     |
| ııJ.                                      | List Certa   | III Giits alia C   |                    |                       |                     |                 |             |                            |                      |     |
| <b>Z</b> N                                | lo   |  |                    | did you give any g    | ifts with a total v | value of more   | than \$600  | ) per person               | 17                   |     |
| <b>2</b> N<br>□ Y                         | lo<br>'es. Fill in the d   | ore you filed for<br>etails for each gi<br>I value of more tha   | ft.                | did you give any g    | ifts with a total v | value of more   | 4           | Dates you gav              |                      |     |
| <b>2</b> N<br>□ Y                         | lo<br>'es. Fill in the d   | etails for each gi   | ft.                |                       | ifts with a total v | value of more   | 4           |                            |                      |     |
| <b>2</b> N<br>□ Y                         | lo<br>'es. Fill in the d   | etails for each gi   | ft.                |                       | ifts with a total v | value of more   | 4           | Dates you gav              | re Value             |     |
| <b>2</b> N □ Y                            | lo<br>'es. Fill in the d   | etails for each gi   | ft.                |                       | ifts with a total v | value of more   | 4           | Dates you gav              |                      |     |
| <b>2</b> N □ Y                            | lo<br>'es. Fill in the d<br>Gifts with a tota<br>per person  | etails for each gi   | ft.                |                       | ifts with a total v | value of more   | 4           | Dates you gav              | ve Value<br>\$       |     |
| <b>2</b> N □ Y                            | lo<br>'es. Fill in the d<br>Gifts with a tota<br>per person  | etails for each gi   | ft.                |                       | ifts with a total v | value of more   | 4           | Dates you gav              | re Value             |     |
| <b>☑</b> N                                | lo  Yes. Fill in the d  Gifts with a tota per person  erson to Whom You  | etails for each gi   | ft.                |                       | ifts with a total v | value of more   | 4           | Dates you gav              | ve Value<br>\$       |     |
| <b>☑</b> N                                | lo<br>'es. Fill in the d<br>Gifts with a tota<br>per person  | etails for each gi   | ft.                |                       | ifts with a total v | value of more   | 4           | Dates you gav              | ve Value<br>\$       |     |
| ₩ N N N N N N N N N N N N N N N N N N N   | lo  Yes. Fill in the di  Gifts with a tota per person  erson to Whom You  lumber Street  | etails for each gir  | ft.<br>an \$600 De |                       | ifts with a total v | value of more   | 4           | Dates you gav              | ve Value<br>\$       |     |
| ₩ N N N N N N N N N N N N N N N N N N N   | lo  Yes. Fill in the d  Gifts with a tota per person  erson to Whom You  | etails for each gi   | ft.<br>an \$600 De |                       | ifts with a total v | value of more   | 4           | Dates you gav              | ve Value<br>\$       |     |
| V N Y                                     | lo  Yes. Fill in the di  Gifts with a tota per person  erson to Whom You  lumber Street  | etails for each gir  | ft.<br>an \$600 De |                       | ifts with a total v | value of more   | 4           | Dates you gav              | ve Value<br>\$       |     |
| V N Y                                     | lo 'es. Fill in the d Gifts with a tota per person  erson to Whom You tumber Street  | etails for each gir  | ft.<br>an \$600 De |                       | ifts with a total v | value of more   | 4           | Dates you gav              | ve Value<br>\$       |     |
| N Y P G G P G                             | Gifts with a total  Gifts with a total  Gifts with a total  Gifts with a total   | etails for each gir  | an \$600 De        |                       | ifts with a total v | value of more   | -           | Dates you gavine gifts     | ve Value<br>\$<br>\$ |     |
| N Y P G G P G                             | Gifts with a tota per person  erson to Whom You  lumber Street   | etails for each gir  I value of more the Gave the Gift  State Zi  hip to you                                       | an \$600 De        | escribe the gifts     | ifts with a total v | value of more   | -           | Dates you gav<br>the gifts | ve Value<br>\$<br>\$ |     |
| N Y P G G P G                             | Gifts with a total  Gifts with a total  Gifts with a total  Gifts with a total   | etails for each gir  I value of more the Gave the Gift  State Zi  hip to you                                       | an \$600 De        | escribe the gifts     | ifts with a total v | value of more   | -           | Dates you gavine gifts     | ve Value<br>\$<br>\$ |     |
| N N G P G P                               | Gifts with a total  Gifts with a total  Gifts with a total  Gifts with a total   | etails for each gir  I value of more that Gave the Gift  State Zi  hip to you  value of more that                  | an \$600 De        | escribe the gifts     | ifts with a total v | value of more   | -           | Dates you gavine gifts     | ve Value<br>\$<br>\$ |     |
| N N G P G P                               | Gifts with a total per person  erson to Whom You  lumber Street  erson's relations  Sifts with a total per person                        | etails for each gir  I value of more that Gave the Gift  State Zi  hip to you  value of more that                  | an \$600 De        | escribe the gifts     | ifts with a total v | value of more   | -           | Dates you gavine gifts     | ve Value<br>\$<br>\$ |     |
| N N G P G P                               | Gifts with a total per person  erson to Whom You  lumber Street  erson's relations  Sifts with a total per person                        | etails for each gir  I value of more that Gave the Gift  State Zi  hip to you  value of more that                  | an \$600 De        | escribe the gifts     | ifts with a total v | value of more   | -           | Dates you gav              | ve Value<br>\$<br>\$ |     |
| N Y P                                     | Gifts with a total per person  erson to Whom You  lumber Street  erson's relations  Sifts with a total per person                        | etails for each girl I value of more that Gave the Gift  State Zi hip to you  value of more that                   | an \$600 De        | escribe the gifts     | ifts with a total v | value of more   | -           | Dates you gav              | ve Value<br>\$<br>\$ |     |
| N O P G P P P P P P P P P P P P P P P P P | Gifts with a total per person  erson to Whom You tumber Street  Sifts with a total per person  Sifts with a total per person to Whom You | etails for each girl I value of more that Gave the Gift  State Zi hip to you  value of more that                   | an \$600 De        | escribe the gifts     | ifts with a total v | value of more   | -           | Dates you gav              | ve Value<br>\$<br>\$ |     |
| N O P G P P P P P P P P P P P P P P P P P | Gifts with a total per person  erson to Whom You  lumber Street  erson's relations  Sifts with a total per person                        | etails for each girl I value of more that Gave the Gift  State Zi hip to you  value of more that                   | an \$600 De        | escribe the gifts     | ifts with a total v | value of more   | -           | Dates you gav              | ve Value<br>\$<br>\$ |     |
| <b>☑</b> Y                                | Gifts with a total per person  erson to Whom You tumber Street  Sifts with a total per person  Sifts with a total per person to Whom You | etails for each girl I value of more that I Gave the Gift  State Zinhip to you  value of more that I Gave the Gift | an \$600 De        | escribe the gifts     | ifts with a total v | value of more   | -           | Dates you gav              | ve Value<br>\$<br>\$ |     |

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| otor 1  | Daniel First Name Middle Name                                   | Villareal<br>Last Name   | Case number (# known)                | 1                                       |                        |
|---------|---|--|--------------------------------------|---|------------------------|
|         |   |  |                                      |   |                        |
| ı. Witl | hin 2 years before you filed fo                                 | or bankruptcy, did you give any gifts o  | r contributions with a total va      | lue of more than \$60                   | 00 to any charity?     |
|         |   |  |                                      |   |                        |
| Ч       | Yes. Fill in the details for each                               | gift or contribution.  |                                      |   |                        |
|         | Gifts or contributions to chariti<br>that total more than \$600 | es Describe what you contribute  | <b>d</b>                             | Date you<br>contributed                 | Value                  |
|         | Charity's Name  |  |                                      | <del> </del>                            | \$                     |
|         | 4 100   |  |                                      | <del></del>                             | \$                     |
|         | Number Street   |  |                                      |   |                        |
|         | City State ZIP Code   |  |                                      |   |                        |
|         |   |  |                                      |   |                        |
| art 6   | List Certain Losses   |  |                                      |   |                        |
|         | Describe the property you lost how the loss occurred            | -  | nce has paid. List pending insurance | Date of your loss                       | Value of property lost |
|         |   |  |                                      |   | \$                     |
|         |   |  |                                      |   |                        |
| art 7   | 7: List Certain Payment   | e or Transfore   |                                      |   |                        |
| irt /   |   |  |                                      |   |                        |
| yοι     | u consulted about seeking ba                                    | r bankruptcy, did you or anyone else a<br>nkruptcy or preparing a bankruptcy p<br>petition preparers, or credit counseling a | etition?                             |   | to anyone              |
|         | •   | position proparoto, or croak controlling a   | gonolog (or convicto roquirou in     | your burniapioy.                        |                        |
|         | Yes. Fill in the details.                                       |  |                                      |   |                        |
|         | Person Who Was Paid   | Description and value of any   | property transferred                 | Date payment or<br>transfer was<br>made | Amount of payment      |
|         |   |  |                                      |   |                        |
|         | Number Street   |  |                                      | <del></del>                             | \$                     |
|         |   | 700 0-1  |                                      |   | \$                     |
|         | City State  | ZIP Code   |                                      |   |                        |
|         | Email or website address  |  |                                      |   |                        |
|         | Person Who Made the Payment, if Not                             | You  |                                      |   |                        |

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|            | First Name Middle Name La  | Villareal  | Case number (if known)   |                                   |                     |
|------------|--|--|--|-----------------------------------|---------------------|
|            | First Name Middle Name La  | or Laguna  |  |                                   |                     |
|            | i sussense con como multiro. E sin ricordo e la ricordo e la ricordo de desenvel de los como en recentro e El Provinción   | Description and value of any property  | r transferred  | Date payment or transfer was made | Amount of payment   |
|            | Person Who Was Paid  | _  |  |                                   | <b>c</b>            |
|            | Number Street  | _  |  |                                   | <b>a</b>            |
|            | **************************************   | _  |  |                                   | \$                  |
|            | City State ZIP Code  |  |  |                                   |                     |
|            |  |  |  |                                   |                     |
|            | Email or website address   | _  |  |                                   |                     |
|            | Person Who Made the Payment, if Not You  |  |  |                                   |                     |
| Do         | mised to help you deal with your cred not include any payment or transfer that  No  Yes. Fill in the details.  |  | editors?   |                                   |                     |
|            | Yes. Fill in the details.  | Description and value of any property  | / transferred  | Date payment or transfer was made | Amount of pa        |
|            | Person Who Was Paid  | _  |  | made                              |                     |
|            | Number Street  | _  |  |                                   | \$                  |
|            |  | _  |  | <del></del>                       | \$                  |
|            |  |  |  |                                   |                     |
| . Wit      | City State ZIP Code hin 2 years before you filed for bankro  | <br>uptcv. did vou sell. trade. or otherwis  | e transfer any property to   | o anvone, other tha               | an property         |
| Incl<br>Do | hin 2 years before you filed for bankrinsferred in the ordinary course of you ude both outright transfers and transfers not include gifts and transfers that you h   | r business or financial affairs?<br>made as security (such as the granting   |  | -                                 |                     |
| Incl<br>Do | hin 2 years before you filed for bankronsferred in the ordinary course of you ude both outright transfers and transfers not include gifts and transfers that you h   | r business or financial affairs?<br>made as security (such as the granting   |  | ortgage on your pro               | perty).  Date trans |
| Incl<br>Do | hin 2 years before you filed for bankronsferred in the ordinary course of you ude both outright transfers and transfers not include gifts and transfers that you h   | r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property             | of a security interest or m  Describe any property                         | ortgage on your pro               | perty).  Date trans |
| Incl<br>Do | hin 2 years before you filed for bankmasferred in the ordinary course of you ude both outright transfers and transfers not include gifts and transfers that you had been been with the details.  | r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property             | of a security interest or m  Describe any property                         | ortgage on your pro               | perty).  Date trans |
| Incl<br>Do | hin 2 years before you filed for bankrinsferred in the ordinary course of you ude both outright transfers and transfers not include gifts and transfers that you have No Yes. Fill in the details.  Person Who Received Transfer   | r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property             | of a security interest or m  Describe any property                         | ortgage on your pro               | perty).  Date trans |
| Incl<br>Do | hin 2 years before you filed for bankrinsferred in the ordinary course of you ude both outright transfers and transfers not include gifts and transfers that you have No Yes. Fill in the details.  Person Who Received Transfer   | r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property             | of a security interest or m  Describe any property                         | ortgage on your pro               | perty).  Date trans |
| Incl<br>Do | hin 2 years before you filed for bankmasterred in the ordinary course of you ude both outright transfers and transfers not include gifts and transfers that you have No Yes. Fill in the details.  Person Who Received Transfer  | r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property transferred | of a security interest or m  Describe any property or debts paid in exchar | ortgage on your pro               | perty).  Date trans |
| Incl<br>Do | hin 2 years before you filed for bankmasterred in the ordinary course of you ude both outright transfers and transfers not include gifts and transfers that you have not include gifts and transfers.  Person Who Received Transfer  Number Street                                     | r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property transferred | of a security interest or m  Describe any property or debts paid in exchar | ortgage on your pro               | perty).  Date trans |
| Incl<br>Do | hin 2 years before you filed for bankmasferred in the ordinary course of you ude both outright transfers and transfers not include gifts and transfers that you have been been been been been been been be   | r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property transferred | of a security interest or m  Describe any property or debts paid in exchar | ortgage on your pro               | perty).  Date trans |
| Incl<br>Do | hin 2 years before you filed for bankmasferred in the ordinary course of you ude both outright transfers and transfers not include gifts and transfers that you have not include gifts and transfers.  Person Who Received Transfer  City State ZIP Code  Person's relationship to you | r business or financial affairs? made as security (such as the granting ave already listed on this statement.  Description and value of property transferred | of a security interest or m  Describe any property or debts paid in exchar | ortgage on your pro               | perty).             |

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| otor 1          | Daniel   |  | Villareal  | Case number (if kno  | wn)   |  |
|-----------------|--|--|--|--|---|--|
|                 | First Name   | Middle Name  | Last Name  |  |   |  |
|                 |  |  |  |  |   |  |
| . With          | in 10 years bef  | ore you filed for  | bankruptcy, did you transfer any proper  | y to a self-settled trus   | t or similar device of w                        | hich you   |
| are             | a beneficiary?   | (These are often o   | called asset-protection devices.)  |  |   |  |
|                 |  |  |  |  |   |  |
| <b>'</b>        | Yes. Fill in the d   | etails.  |  |  |   |  |
|                 |  |  | Description and value of the prope   | rty transferred  |   | Date transfer<br>was made  |
|                 |  |  |  |  |   | was mass   |
|                 | Name of trust  |  |  |  |   |  |
| ,               | Maine of trust   |  |  |  |   |  |
| _               |  |  |  |  |   |  |
|                 |  |  |  |  |   |  |
|                 |  | and the second s | a para ang ang ang ang ang ang ang ang ang an  | Poves and Stores   | automora esta esta esta esta esta esta esta est | i raini ya shini miga waki sa kutura i shinina i shinina wakishi Mari ba |
|                 |  |  | counts, Instruments, Safe Deposit  |  |   |  |
|                 |  |  | ankruptcy, were any financial accounts o   | r instruments held in  | your name, or for your                          | benefit,   |
| clos            | sed, sold, move  | ed, or transferred   | l?   | finates of denosity sh   | aree in hanke credit un                         | ione   |
| inci            | ude checking,<br>kerage houses   | savings, money<br>. pension funds.   | market, or other financial accounts; cert cooperatives, associations, and other fit      | ncates of deposit, sin   | nes in Danks, Cleak an                          | ions,  |
|                 | -  | , pononon nama,  | .,   |  |   |  |
|                 | Yes. Fill in the   | details.   |  |  |   |  |
|                 |  |  | Last 4 digits of account number  | Type of account or   | Date account was                                | Last balance before  |
|                 |  |  | -  | instrument   | closed, sold, moved,<br>or transferred          | closing or transfer  |
|                 |  |  |  |  |   |  |
|                 | Name of Financial  | Institution  | xxxx   | Checking   |   | \$   |
|                 |  |  |  |  |   |  |
|                 | Number Street  |  |  | ☐ Savings  |   |  |
|                 | Number Street  |  |  | ☐ Savings ☐ Money market   |   |  |
|                 | Number Street  |  | · · · · · · · · · · · · · · · · · · ·  | _  |   |  |
|                 | Number Street  | State ZIF  | Code   | ☐ Money market   |   |  |
|                 |  | State ZIF  | Code   | Money market  Brokerage  |   |  |
|                 | City   |  | Code XXXX  | Money market  Brokerage  |   | \$   |
|                 |  |  |  | Money market Brokerage Other   |   | \$   |
|                 | City   |  |  | Money market  Brokerage  Other  Checking                                   |   | \$   |
|                 | City  Name of Financial  |  |  | Money market Brokerage Other Checking Savings                              |   | \$   |
|                 | City  Name of Financial  |  |  | Money market  Brokerage  Other  Checking  Savings  Money market  Brokerage |   | \$   |
|                 | City  Name of Financial  | l Institution  |  | Money market  Brokerage  Other  Checking Savings Money market              |   | \$   |
| 1. Do           | Name of Financial Number Street  | I Institution State ZIF  | XXXX   | Money market Brokerage Other Checking Savings Money market Brokerage Other | box or other depositor                          | \$<br>y for  |
| sec             | Name of Financial Number Street  City you now have,  | I Institution State ZIF  | Code within 1 year before you filed for bankru   | Money market Brokerage Other Checking Savings Money market Brokerage Other | box or other depositor                          | \$<br>y for  |
| sec<br>Ø        | Name of Financial Number Street  City  you now have, curities, cash, contact to the contact to t | State ZIF<br>or did you have<br>or other valuable  | Code within 1 year before you filed for bankru   | Money market Brokerage Other Checking Savings Money market Brokerage Other | box or other depositor                          | \$<br>y for  |
| sec<br>Ø        | Name of Financial Number Street  City you now have,  | State ZIF<br>or did you have<br>or other valuable  | XXXX  Code  within 1 year before you filed for bankrus?                                  | Money market Brokerage Checking Savings Money market Brokerage Other       |   |  |
| sec<br>Ø        | Name of Financial Number Street  City  you now have, curities, cash, contact to the contact to t | State ZIF<br>or did you have<br>or other valuable  | Code within 1 year before you filed for bankru   | Money market Brokerage Checking Savings Money market Brokerage Other       | box or other depositor                          |  |
| sec<br>Ø        | Name of Financial Number Street  City  you now have, curities, cash, contact to the contact to t | State ZIF<br>or did you have<br>or other valuable  | XXXX  Code  within 1 year before you filed for bankrus?                                  | Money market Brokerage Checking Savings Money market Brokerage Other       |   | Do you sti<br>have it?   |
| sec<br>Ø        | Name of Financial  Number Street  City  you now have, curities, cash, o  | State ZIF<br>or did you have<br>or other valuables<br>details.   | XXXX  Code  within 1 year before you filed for bankrus?                                  | Money market Brokerage Checking Savings Money market Brokerage Other       |   | Do you sti   |
| sec             | Name of Financial Number Street  City  you now have, curities, cash, contact to the contact to t | State ZIF<br>or did you have<br>or other valuables<br>details.   | XXXX  Code  within 1 year before you filed for bankrus?                                  | Money market Brokerage Checking Savings Money market Brokerage Other       |   | Do you sti<br>have it?<br>☐ No   |
| sec<br><b>V</b> | Name of Financial Number Street  City  you now have, curities, cash, con No Yes. Fill in the   | State ZIF<br>or did you have<br>or other valuables<br>details.   | Code within 1 year before you filed for bankrus? Who else had access to it?              | Money market Brokerage Checking Savings Money market Brokerage Other       |   | Do you sti<br>have it?<br>☐ No   |
| sec<br>Ø        | Name of Financial  Number Street  City  you now have, curities, cash, o  | State ZIF<br>or did you have<br>or other valuables<br>details.   | XXXXXXXXX  Code  within 1 year before you filed for bankrus?  Who else had access to it? | Money market Brokerage Checking Savings Money market Brokerage Other       |   | Do you sti<br>have it?<br>☐ No   |

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| ebtor 1   | Daniel First Name Middle Name Las  | Villareal traine  | Case number (if known)  |                        |
|---|--|---|---|------------------------|
| na Hava   | way stared property in a storage unit  | or place other than your home wil   | thin 1 year before you filed for bankruptcy?  | ,                      |
|   | · · · · · · · · · · · · · · · · · · ·  | Who else has or had access to it?   | Describe the contents   | Do you still           |
|   |  |   |   | have it?<br>☐ No       |
|   | Name of Storage Facility   | Name  |   | ☐ Yes                  |
|   | Number Street  | Number Street   |   |                        |
|   |  | City State ZIP Code   |   |                        |
|   | City State ZIP Code  |   |   |                        |
| Part 9  |  | or Control for Someone Else   |   |                        |
| or h  | old in trust for someone.  | someone else owns? Include any ¡  | property you borrowed from, are storing fo  | r,                     |
|   | No<br>Yes. Fill in the details.  |   |   |                        |
|   |  | Where is the property?  | Describe the property   | Value                  |
|   | Owner's Name   |   |   | \$                     |
|   |  |   |   |                        |
|   | Number Street  | Number Street   |   |                        |
|   | Number Street  | Number Street   | <del></del>   |                        |
|   | Number Street  City State ZIP Code   |   | P Code  |                        |
| Part 1  | City State ZIP Code  | City State ZI   | P Code  |                        |
|   | City State ZIP Code  O: Give Details About Environ  purpose of Part 10, the following def  | City State Zi mental Information initions apply:  |   |                        |
| For the   | City State ZIP Code  O: Give Details About Environ  purpose of Part 10, the following defi  ironmental law means any federal, sta  | mental information initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, s  | oncerning pollution, contamination, release<br>urface water, groundwater, or other mediu  |                        |
| For the  Env haz incl                                   | City State ZIP Code  O: Give Details About Environ  purpose of Part 10, the following defi  ironmental law means any federal, sta  ardous or toxic substances, wastes, ouding statutes or regulations controll  means any location, facility, or prope   | mental information initions apply: ate, or local statute or regulation corn material into the air, land, soil, sing the cleanup of these substancerty as defined under any environments.  | oncerning pollution, contamination, release<br>urface water, groundwater, or other mediu  | m,                     |
| For the  Env haz incl  Site utili                       | City State ZIP Code  O: Give Details About Environ  purpose of Part 10, the following defi  ironmental law means any federal, sta  ardous or toxic substances, wastes, ouding statutes or regulations controll  means any location, facility, or prope  ze it or used to own, operate, or utilizardous material means anything an ele  | mental information  initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substancerty as defined under any environme it, including disposal sites.   | oncerning pollution, contamination, release<br>urface water, groundwater, or other mediu<br>es, wastes, or material.  | m,                     |
| For the  Env haz incl  Site utili  Haz sub              | City State ZIP Code  O: Give Details About Environ  purpose of Part 10, the following defi  ironmental law means any federal, sta  ardous or toxic substances, wastes, ouding statutes or regulations controll  means any location, facility, or prope  ze it or used to own, operate, or utilize  | city State Zimental Information  initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substance erty as defined under any environment, including disposal sites.  nvironmental law defines as a haza, contaminant, or similar term.  | oncerning pollution, contamination, release<br>urface water, groundwater, or other mediu<br>es, wastes, or material.<br>nental law, whether you now own, operate,<br>ardous waste, hazardous substance, toxic                           | m,                     |
| For the Env haz incl Site utili Haz sub                 | City State ZIP Code  O: Give Details About Environ  purpose of Part 10, the following defi  ironmental law means any federal, sta  ardous or toxic substances, wastes, or  uding statutes or regulations controll  means any location, facility, or prope  ze it or used to own, operate, or utilize  ardous material means anything an elestance, hazardous material, pollutant  all notices, releases, and proceedings                         | city State Zimental Information  initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substance erty as defined under any environment, including disposal sites.  nvironmental law defines as a haza contaminant, or similar term.   | oncerning pollution, contamination, release<br>urface water, groundwater, or other mediu<br>es, wastes, or material.<br>nental law, whether you now own, operate,<br>ardous waste, hazardous substance, toxic                           | m,<br>or               |
| For the  Env haz incl Site utili Haz sub Report 24. Has | City State ZIP Code  O: Give Details About Environ  purpose of Part 10, the following definenmental law means any federal, standous or toxic substances, wastes, ouding statutes or regulations controll means any location, facility, or proper it or used to own, operate, or utilizardous material means anything an elestance, hazardous material, pollutant, all notices, releases, and proceeding any governmental unit notified you the   | city State Zimental Information  initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substance erty as defined under any environment, including disposal sites.  nvironmental law defines as a haza contaminant, or similar term.   | oncerning pollution, contamination, release<br>urface water, groundwater, or other mediu<br>es, wastes, or material.<br>nental law, whether you now own, operate,<br>ardous waste, hazardous substance, toxic<br>of when they occurred. | m,<br>or               |
| For the  Env haz incl Site utili Haz sub Report 24. Has | Give Details About Environ  purpose of Part 10, the following defironmental law means any federal, stardous or toxic substances, wastes, ouding statutes or regulations controll means any location, facility, or proper it or used to own, operate, or utilizardous material means anything an estance, hazardous material, pollutant, all notices, releases, and proceeding, any governmental unit notified you the                            | city State Zimental Information  initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substance erty as defined under any environment, including disposal sites.  nvironmental law defines as a haza contaminant, or similar term.   | oncerning pollution, contamination, release<br>urface water, groundwater, or other mediu<br>es, wastes, or material.<br>nental law, whether you now own, operate,<br>ardous waste, hazardous substance, toxic<br>of when they occurred. | m,<br>or               |
| For the  Env haz incl Site utili Haz sub Report 24. Has | City State ZIP Code  O: Give Details About Environ  purpose of Part 10, the following definenmental law means any federal, standous or toxic substances, wastes, ouding statutes or regulations controll means any location, facility, or proper it or used to own, operate, or utilizardous material means anything an elestance, hazardous material, pollutant, all notices, releases, and proceeding any governmental unit notified you the   | mental information initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substance rty as defined under any environme it, including disposal sites. Invironmental law defines as a haza contaminant, or similar term. Is that you know about, regardless at you may be liable or potentially                              | oncerning pollution, contamination, release urface water, groundwater, or other mediuses, wastes, or material.  nental law, whether you now own, operate, ardous waste, hazardous substance, toxic of when they occurred.               | m,<br>or<br>ental law? |
| For the  Env haz incl Site utili Haz sub Report 24. Has | City State ZIP Code  O: Give Details About Environ  purpose of Part 10, the following definenmental law means any federal, standous or toxic substances, wastes, ouding statutes or regulations controll means any location, facility, or proper it or used to own, operate, or utilizardous material means anything an elestance, hazardous material, pollutant, all notices, releases, and proceeding any governmental unit notified you the   | mental information initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substance rty as defined under any environme it, including disposal sites. Invironmental law defines as a haza contaminant, or similar term. Is that you know about, regardless at you may be liable or potentially                              | oncerning pollution, contamination, release urface water, groundwater, or other mediuses, wastes, or material.  nental law, whether you now own, operate, ardous waste, hazardous substance, toxic of when they occurred.               | m,<br>or<br>ental law? |
| For the  Env haz incl Site utili Haz sub Report 24 Has  | City State ZIP Code  O: Give Details About Environ  purpose of Part 10, the following defironmental law means any federal, standous or toxic substances, wastes, ouding statutes or regulations controll means any location, facility, or propeze it or used to own, operate, or utilizardous material means anything an estance, hazardous material, pollutant, all notices, releases, and proceeding any governmental unit notified you the No | mental information  initions apply: ate, or local statute or regulation cormaterial into the air, land, soil, sing the cleanup of these substance or yet as defined under any environment, it, including disposal sites.  Invironmental law defines as a haza contaminant, or similar term.  Is that you know about, regardless that you may be liable or potentially governmental unit | oncerning pollution, contamination, release urface water, groundwater, or other mediuses, wastes, or material.  nental law, whether you now own, operate, ardous waste, hazardous substance, toxic of when they occurred.               | m,<br>or<br>ental law? |

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| 1        | Daniel First Name Middle Name                               | Villareal<br>Last Name   | Case number (# known)                   |                                       |
|----------|---|--|---|---------------------------------------|
|          |   |  |   |                                       |
|          |   | al unit of any release of hazardous mater  | ial?                                    |                                       |
| Ø :      |   |  |   |                                       |
| <u></u>  | Yes. Fill in the details.                                   | G  | Facility of the base is                 | Data of votice                        |
|          |   | Governmental unit  | Environmental law, if you know it       | Date of notice                        |
|          |   |  |   |                                       |
|          | Name of site  | Governmental unit  | -                                       |                                       |
|          | Number Street   | Number Street  | <u>.</u>                                |                                       |
|          | Number Street   | Number Street  |   |                                       |
|          |   | City State ZIP Code  | _                                       |                                       |
|          |   | City State 21 Code   |   |                                       |
|          | City State ZIP  | Code   |   |                                       |
|          | a vare baan a nambe in anceivaliai                          | al ar administrativa proceeding under a  | vy anvironmental law? Include acttleme  | nto and arders                        |
|          |   | al or administrative proceeding under a  | iy environmental law? include settleme  | nts and orders.                       |
| Z I      |   |  |   |                                       |
| <b>"</b> | Yes. Fill in the details.                                   |  |   | Status of the                         |
|          |   | Court or agency  | Nature of the case                      | Case                                  |
|          | Case title  |  |   | -                                     |
|          |   | Court Name   | <del></del>                             | Pending                               |
|          |   |  |   | On appea                              |
|          |   | Number Street  |   | ☐ Conclude                            |
|          | A   |  |   |                                       |
|          | Case number   | City State ZIP Co  | de                                      |                                       |
|          |   |  |   |                                       |
| rt 1     | Give Details About Yo                                       | our Business or Connections to Any   | / Business                              |                                       |
|          |   | bankruptcy, did you own a business or h  |   | any business?                         |
|          |   | ployed in a trade, profession, or other a  |   |                                       |
|          | A member of a limited liabil     A partner in a partnership | ity company (LLC) or limited liability par   | (nersnip (LLP)                          |                                       |
|          |   | aging executive of a corporation   |   |                                       |
|          |   | he voting or equity securities of a corpo  | ration                                  |                                       |
|          |   |  | ation                                   |                                       |
|          | No. None of the above applies.                              |  |   |                                       |
| Ц,       | Yes. Check all that apply above                             | and fill in the details below for each but   |   |                                       |
|          |   | Describe the nature of the busine  |   | on number<br>Security number or ITIN. |
|          | Business Name   |  | Do not motivad doctor                   |                                       |
|          |   |  | EIN:                                    |                                       |
|          | Number Street   | Name of accountant or bookkeep   | er Dates business existe                | ad                                    |
|          |   |  | Dates pusiness exist                    | •                                     |
|          |   |  | From T                                  | o                                     |
|          | City State ZIP  | Code   |   |                                       |
|          |   | Describe the nature of the busine  | ss Employer Identification              | on number                             |
|          | Business Name   |  | Do not include Social                   | Security number or ITIN.              |
|          |   |  | EIAI.                                   |                                       |
|          | Number Street   | and the second s | EIN:                                    |                                       |
|          |   | Name of accountant or bookkeep   | er Dates business existe                | ed                                    |
|          |   | <del></del>  | . · · · · · · · · · · · · · · · · · · · |                                       |
|          |   |  | _                                       |                                       |
|          |   |  | From T                                  | o                                     |

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| Debtor 1    | Daniel                                       | Villareal  | Case number (if known)   |
|-------------|--|--|--|
|             | First Name Middle Name Last I                | Name   |  |
| 1           |  |  |  |
|             |  | Describe the nature of the business  | Employer Identification number  Do not include Social Security number or ITIN.   |
|             | Business Name                                |  |  |
|             |  |  | EIN:   |
| i           | Number Street                                | Name of accountant or bookkeeper   | Dates business existed   |
|             |  | Hattle of accountant of bookkeeper   |  |
|             |  |  |  |
|             | 700.1  |  | From To  |
|             | City State ZIP Code                          |  |  |
|             |  |  |  |
| og Witt     | hin 2 years before you filed for hankrur     | ntcv. did vou give a financial statem  | ent to anyone about your business? Include all financial   |
|             | itutions, creditors, or other parties.       | ,, u.u. you go u   |  |
| V           | Ai   |  |  |
|             | No<br>Yes. Fill in the details below.        |  |  |
|             | 103. 1 III III tile detaile below.           |  |  |
|             |  | Date issued  |  |
|             |  |  |  |
|             | Name   | MM / DD / YYYY   |  |
|             |  |  |  |
|             | Number Street                                | •  |  |
|             |  |  |  |
|             |  |  |  |
|             |  |  |  |
|             | City State ZIP Code                          |  |  |
|             |  |  |  |
|             |  |  |  |
| Part 1      | 2 Sign Below                                 |  |  |
| rait        | 74. Olgii below                              | - Later - Committee - Committe | MARKET AND A STATE OF THE STATE |
| l h         | nave read the answers on this <i>Stateme</i> | nt of Financial Affairs and any attacl   | ments, and I declare under penalty of perjury that the   |
| an          | swers are true and correct. I understan      | nd that making a false statement, co<br>n result in fines up to \$250 000, or it   | ncealing property, or obtaining money or property by fraud nprisonment for up to 20 years, or both.  |
|             | U.S.C. §§ 152, 1341, 1519, and 3571.         | ii 163dit iii 1iil63 ap to 4200,000, o. ii   | inprocessing to the new years, or means  |
|             | 1.   |  |  |
| 4           | · X1(W//-/                                   | •  |  |
| J           | 10 V 00/21                                   | <u> </u>   |  |
|             | Signature of Debtor 1                        | Signature of Debtor  | 2  |
|             | Date 9/29/2017                               | D.A.   |  |
| i<br>1<br>2 |  | Date   |  |
| Di          | d you attach additional pages to Your        | Statement of Financial Affairs for In  | dividuals Filing for Bankruptcy (Official Form 107)?   |
|             | No   |  |  |
|             | l Yes  |  |  |
| 1           |  |  |  |
| Di          | id you pay or agree to pay someone wh        | no is not an attorney to help you fill   | out bankruptcy forms?  |
|             | l No   |  |  |
| 5           | Yes. Name of person                          |  | . Attach the Bankruptcy Petition Preparer's Notice,  |
|             |  |  | Declaration, and Signature (Official Form 119).  |
|             |  | ek 1897 y Shengay ya gana haganna ga kuni ma kana a 12 n gana ya kasi maka maya maya ya maka shekishingin gengingan maka   | The second of th |

| Debtor 1 Daniel Villareal First Name Middle Name Last Name             |  |  |  |  |  |
|--|--|--|--|--|--|
| Files traine mode (400)  |  |  |  |  |  |
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name          |  |  |  |  |  |
| United States Bankruptcy Court for the: Central District of California |  |  |  |  |  |
| Case number(If known)  |  |  |  |  |  |

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 4: List Your Creditors Who Have Secured Claims

| For any creditors that you listed in Part 1 of Schedule D: C information below. |  |  |  |
|---|--|--|--|
| Identify the creditor and the property that is collateral                       | What do you intend to do with the property that secures a debt?  | Did you claim the property as exempt on Schedule C |  |
| Creditor's wells Fargo Dealer Svc   | ☐ Surrender the property.  | <b>☑</b> No  |  |
| name.   | Retain the property and redeem it.                               | Yes  |  |
| Description of 2014 Chevrolet Camaro property securing debt:                    | Retain the property and enter into a<br>Reaffirmation Agreement. |  |  |
| Securing debt.  | Retain the property and [explain]:                               |  |  |
| Creditor's  | ☐ Surrender the property.  | No   |  |
| name:   | Retain the property and redeem it.                               | Yes  |  |
| Description of property   | Retain the property and enter into a<br>Reaffirmation Agreement. |  |  |
| securing debt:  | Retain the property and [explain]:                               | _  |  |
| Creditor's  | ☐ Surrender the property.  | □ No   |  |
| name:   | Retain the property and redeem it.                               | Yes  |  |
| Description of property   | Retain the property and enter into a<br>Reaffirmation Agreement. |  |  |
| securing debt:  | Retain the property and [explain]:                               | _  |  |
| Creditor's  | ☐ Surrender the property.  | □ No   |  |
| name:   | Retain the property and redeem it.                               | ☐ Yes  |  |
| Description of property securing debt:  | Retain the property and enter into a Reaffirmation Agreement.    |  |  |
| Securing debt.  | Retain the property and [explain]:                               |  |  |
|   |  | _  |  |

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| Debtor 1 | Daniel     |             | Villareal | Case number (If known)_ |  |
|----------|------------|-------------|-----------|-------------------------|--|
|          | First Name | Middle Name | Last Name |                         |  |

Part 2: List Your Unexpired Personal Property Leases

| For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G),                  |
|--|
| Totally unexpired persons and leaves the state of the leave period has not vet   |
| fill in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has not yet |
| ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).                                     |

|  | Will the lease be assumed?  |
|--|---|
|  | ☐ No  |
|  | Yes   |
| ം പ്രവേശങ്ങളെ പ്രധാന വര്ട്ടായില് പ്രിക്കുന്നു. വര്ട്ടായില് പ്രാവര് വര്ട്ടായില് വര്ട്ടായില് വര്ട്ടായില് വര്ട്ടായില്   | en en avantado de la composição dos de la definitiva de la composição de composição de la composição de la comp |
|  | □ No  |
| egoporansion administrativo en en en la regiona de la 1800 de la 1   | ☐ Yes   |
|  | □ No  |
|  | ☐ Yes   |
| anne a seu de Californi e (sue la disconsiste de la disconsiste de la disconsiste de la constante de la consta | ☐ No<br>☐ Yes   |
|  | <b>□</b> Yes  |
| egge i i i i i i i i i i i i i i i i i i   | □ No<br>□ Yes   |
|  | ⊔ Yes   |
| Section 1 Value Section 2 (1997)   | ☐ No<br>☐ Yes   |
|  | <b>u</b> 165  |
| group, a a como a consequente en emplaro de Control Consequente de Control Consequente de Control Consequente  | □ No<br>□ Yes   |
|  | <b>— 165</b>  |
| removed the second seco |   |
|  |   |
|  |   |

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| Fill in this information to identify your case:   | Check one box only as directed in this form and in  |
|---|---|
| Debter 1 Daniel Villareal   | Form 122A-1Supp:  |
| Debtor 1 Daniel VIII area   First Name Middle Name Last Name  | 1. There is no presumption of abuse.  |
| Debtor 2 (Spouse, if filing) First Name Middle Name Last Name   | 2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7  |
| United States Bankruptcy Court for the: Central District of California  | Means Test Calculation (Official Form 122A–2).  |
| Case number(If known)   | 3. The Means Test does not apply now because of<br>qualified military service but it could apply later.   |
|   | ☐ Check if this is an amended filing  |
| Official Form 122A—1  | thiv income 12/15   |
| <b>Chapter 7 Statement of Your Current Mont</b>   |   |
| Be as complete and accurate as possible. If two married people are filing together, be space is needed, attach a separate sheet to this form. Include the line number to which additional pages, write your name and case number (if known). If you believe that you do not have primarily consumer debts or because of qualifying military service, come abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.  Part 1: Calculate Your Current Monthly Income | ch the additional information applies. On the top of any<br>u are exempted from a presumption of abuse because you  |
| 1. What is your marital and filing status? Check one only.  |   |
| Not married. Fill out Column A, lines 2-11.  Married and your spouse is filing with you. Fill out both Columns A and B, lines   | s 2-11.   |
| ☑ Married and your spouse is NOT filing with you. You and your spouse are:  |   |
| Living in the same household and are not legally separated. Fill out both   | Columns A and B, lines 2-11.  |
| Living separately or are legally separated. Fill out Column A, lines 2-11; dunder penalty of perjury that you and your spouse are legally separated under spouse are living apart for reasons that do not include evading the Means Te  | o not fill out Column B. By checking this box, you declare<br>er nonbankruptcy law that applies or that you and your  |
| Fill in the average monthly income that you received from all sources, derived of bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September August 31. If the amount of your monthly income varied during the 6 months, add the Fill in the result. Do not include any income amount more than once. For example, if the income from that property in one column only. If you have nothing to report for any line.                                 | during the 6 full months before you file this 15, the 6-month period would be March 1 through income for all 6 months and divide the total by 6. both spouses own the same rental property, put the |
| income from that property in one column only. If you have nothing to report for any in-   | Column A Column B  Debtor 1 Debtor 2 or non-filing spouse   |
| Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).   | \$ <u>0.0</u> 0 \$  |
| Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.   | \$  |
| 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.  | \$ <u> </u>   |
| Net income from operating a business, profession, Debtor 1 Debtor 2 or farm   |   |
| Gross receipts (before all deductions) \$\$   |   |
| Ordinary and necessary operating expenses - \$ \$   |   |
| Net monthly income from a business, profession, or farm \$ 0.00 \$ Context.   | opy \$0.00 \$   |
| 6. Net income from rental and other real property  Gross receipts (before all deductions)  Debtor 1  S  |   |
| Ordinary and necessary operating expenses -\$ \$  |   |
|   | opy \$ 0.00 \$  |
| 7. Interest, dividends, and royalties   | \$ <u>0.0</u> 0 \$  |

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| Debtor 1   | Daniel First Name Middle M  |   | Villareal  | Case num   | ber (if known)   |  |   |
|--|---|---|--|--|------------------|--|---|
|  |   |   |  | Columi<br>Debtor   |                  | Column B Debtor 2 or non-filing spouse |   |
| 8. Uner  | mployment compensa  | tion  |  | \$   | 0.00             | \$                                     |   |
| Do n   | • •   | ou contend that the am                            | ount received was a benefit  | ·  |                  |  |   |
| F  | or you  |   | \$ <u> </u>  |  |                  |  |   |
|  | or your spouse  |   |  |  |                  |  |   |
| bene   | efit under the Social Sec   | curity Act.                                       | y amount received that was a   | \$   | 0.00             | \$                                     |   |
| Do r<br>as a   | not include any benefits<br>a victim of a war crime, a                | received under the Soc<br>crime against humanit   | Specify the source and amount.<br>cial Security Act or payments recei-<br>ty, or international or domestic<br>arate page and put the total below.  |  |                  |  |   |
| Sc   | ocial Security  |   |  | \$ <u> </u>  | ,817.00          | \$                                     |   |
| Ve   | etrans Affairs Assis  | tance   |  | \$ <u> </u> 1  | ,4 <u>23.</u> 40 | \$                                     |   |
| Tot  | tal amounts from separa   | ate pages, if any.                                |  | + \$   |                  | + \$                                   |   |
| 11. Calc<br>colu   | culate your total curren<br>mn. Then add the total                    | nt monthly income. Action Column A to the total   | dd lines 2 through 10 for each<br>al for Column B.   | S A S TO THE PROPERTY OF THE P | 3,240.40         | \$                                     | \$_3,240.40  Total current monthly income |
| Part 2   | Determine Whet  | her the Means Tes                                 | t Applies to You   |  |                  |  |   |
| 12. <b>Cal</b> c   |   |   | year. Follow these steps:  |  |                  | _                                      | 0.040.40                                  |
| 12a.   | Copy your total curre   | nt monthly income from                            | line 11  |  | Co               | py line 11 here                        | \$ <u>3,240.40</u>                        |
|  | Multiply by 12 (the nu  | imber of months in a ye                           | ear).  |  |                  | gr.n                                   | x 12                                      |
| 12b.   | The result is your ani  | nual income for this par                          | t of the form.   |  |                  | 12b.                                   | \$ <u>38,884.80</u>                       |
| 13. <b>Cal</b>   | culate the median fam   | ily income that applie                            | s to you. Follow these steps:  |  |                  |  |   |
| Fill i   | in the state in which you   | live.   | CA   |  |                  |  |   |
|  | in the number of people   |   | The state of the s |  |                  | Г                                      | \$ 52,416.00                              |
|  | in the median family inc  |   |  |  |                  | 13.                                    | \$ 32,410.00                              |
| To f   | find a list of applicab <del>le</del> n<br>ructions for this form. Tl | nedian income amounts<br>nis list may also be ava | s, go online using the link specified<br>ilable at the bankruptcy clerk's offic  | rin ine sepa<br>ce.  | iate             |  |   |
| 14. <b>Hov</b>   | w do the lines compare  | e?  |  |  |                  |  |   |
| 14a.   | Line 12b is less th<br>Go to Part 3.                                  | an or equal to line 13. (                         | On the top of page 1, check box 1,   | There is no  | presumption      | n of abuse.                            |   |
| 14b.   |   | han line 13. On the top<br>ill out Form 122A–2.   | of page 1, check box 2, The presu  | ımption of a   | buse is dete     | ermined by Form 122                    | A-2.                                      |
| Part 3   | Sign Below  |   |  |  |                  |  |   |
|  | By signing here, I o  | eclare under penalty of                           | f perjury that the information on thi  | s statement  | and in any a     | attachments is true a                  | nd correct.                               |
|  | × ()/   | 104   | ×  |  |                  |  |   |
|  | Signature of Debl   | or 1  |  | Signature of   | Debtor 2         |  |   |
| Commence of the commence of th | Date <u>9 / 2 -</u><br>MM / DD  | 3/2017  |  | Date MM /  | DD /YYYY         | <del>,</del>                           |   |
|  |   |   |  |  |                  |  |   |
|  | If you checked  | line 14a, do NOT fill ou                          | t or file Form 122A-2.   |  |                  |  |   |

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| Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address   | FOR COURT USE ONLY   |
|--|--|
| Villareal, Daniel<br>14414 Serra Road #63<br>Apple Valley, CA 92308  |  |
|  |  |
|  |  |
|  |  |
| <ul><li>☑ Debtor(s) appearing without attorney</li><li>☐ Attorney for Debtor</li></ul>   |  |
|  | ANKRUPTCY COURT LIFORNIA - **SELECT DIVISION**   |
| In re:   | CASE NO.:  |
|  | CHAPTER:   |
| Villareal, Daniel<br>14414 Serra Road #63  |  |
| Apple Valley, CA 92308   | VERIFICATION OF MASTER   |
|  | MAILING LIST OF CREDITORS  |
|  | [LBR 1007-1(a)]  |
|  |  |
| Debtor(s).   |  |
|  |  |
| Pursuant to LBR 1007-1(a), the Debtor, or the Depenalty of perjury that the master mailing list of crsheet(s) is complete, correct, and consistent | btor's attorney if applicable, certifies under editors filed in this bankruptcy case, consisting of with the Debtor's schedules and I/we assume all  |
| responsibility for errors and omissions.   |  |
| Date: 9/29/2012  | DU Elfan   |
| Date   | Signature of Debtor 1  |
| Date:  | O: (Daltan O (inited daltan) (if applicable)   |
|  | Signature of Debtor 2 (joint debtor) (if applicable)   |
| Date:  | Signature of Attorney for Debtor (if applicable)   |
|  | - was grown and the contract of the contract o |

Daniel Villareal 14414 Serra Road #63 Apple Valley, CA 92308

Wells Fargo Dealer Svc PO Box 25341 Santa Ana, CA 92799

CircleBack Lending Inc PO Box 1719 Portland OR 97207

Capital One 26525 N Riverwoods Blvd Mettawa IL 60045

CBNA PO box 6497 Sioux Falls SD 57117

Chase Card/Amazon PO Box 15298 Wilmington DE 19850

Syncb/Jcp PO Box 965007 Orlando FL 32896

Syncb/Lowes PO Box 965005 Orlando FL 32896

Syncb/Walmart PO Box 965024 Orlando FL 32896

USAA PO Box 47504 San Antonio TX 78265 Wells Fargo Card SVC PO Box 14517 Des Moines IA 50306

Wells Fargo PPL PO Box 94435 Albuquerque NM 87199